

Confidential Dealer/Reseller Application

Please Complete this Form and Fax back to us

Company Name: _____

Billing Address: _____

Shipping Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax:** _____

Email: _____ **Website:** _____

Federal Tax ID: _____ **Duns:** _____

Estimated Monthly Credit Required: _____

Quarterly Projected Sales: _____

Sales Contact: _____ **Purchasing Contact:** _____

Type of Business:

Security Contractor Corporate Reseller Distributor-Security

Distributor-Network/PCs I.T. Network Contractor

Other (Specify) _____

Names and Titles of Officers/Owners/Partners:

1. _____ Title: _____

2. _____ Title: _____

3. _____ Title: _____

Bank Reference:

Bank: _____ **Account #:** _____

Address: _____

Contact: _____ **Phone:** _____

Trade References:

1. Name: _____ Account#: _____

Address: _____

Contact: _____ Phone #: _____

Fax#: _____

2. Name: _____ Account #: _____

Address: _____

Contact: _____ Phone #: _____

Fax#: _____

3. Name: _____ Account #: _____

Address: _____

Contact: _____ Phone #: _____

Fax#: _____

IHP Security Systems Terms and Conditions:

- As a dealer there will be no refunds on complete systems or DVR cards, unless otherwise defective.
- As a dealer you are responsible for the evaluation of the DVR product BEFORE installation, service, or sale to your customer / client.
- If you suspect that your DVR product is, or has become defective, you may return it for a prompt exchange. However, you must call technical support for an RMA # before doing so.
- If you return a DVR card back to IHP Security Systems, Inc., and it is not found defective there will be a \$25.00 diagnostic fee.
- Cameras, lenses, power supplies, etc. will come with the standard manufacturers warranty and may be exchanged and / or returned.
- All items returned will have a 15% restocking fee.

By signing below, I attest that the information on this application is accurate and I agree to IHP Security Systems, Inc. Terms and Conditions.

Application Date: _____

Name: _____

Signature: _____