



Corporate Office:
1301 S. SD Hwy. 37
Parkston, SD 57366

Phone: (605) 928-7951
or: 1-800-658-4703
Fax: (605) 928-7952

DEALER APPLICATION

Company Name: _____ Contact: _____
Billing Address: _____ Phone: _____
Shipping Address: _____ Fax: _____
City, State, Zip _____ E-mail: _____
Number of Years in Business _____

BANK INFORMATION

Bank Name: _____ Contact: _____
Address: _____ Phone: _____
City, State, Zip: _____
Account Number: _____

CREDIT REFERENCES

Company Name: _____ Contact: _____
Address: _____ Phone: _____
City, State, Zip _____ Fax: _____

Company Name: _____ Contact: _____
Address: _____ Phone: _____
City, State, Zip _____ Fax: _____

Company Name: _____ Contact: _____
Address: _____ Phone: _____
City, State, Zip _____ Fax: _____

Authorization

The information and statements in this application are true and complete and are made for the purpose of persuading MDS Mfg Co Inc to establish open account. I authorize the release of credit information to MDS Mfg.

Signature _____ Name _____ Title _____ Date _____