



WHOLESALE ACCOUNT APPLICATION

**UP TO
30%
SAVINGS!**

(* Required Information)

COMPANY NAME*

BUSINESS TYPE*

PHONE NUMBER*

FIRST NAME*

LAST NAME*

EMAIL*

ADDRESS*

CITY*

STATE*

ZIP CODE*

COUNTRY*

WEBSITE:

YEARS IN BUSINESS*

CONTRACTOR'S LICENSE#

Are you currently a 1000LED Customer? YES or NO

Please send your completed application to: info@1000LED.com attn: Sales Dept.

NOTE: Please attach your company's W9, Contractor's License and or Resale Certificate for faster approval.