

### SOMC Las Vegas, NV

4606 Andrews St Suite # 4

N. Las Vegas, NV 89081 P- 702-751-8686 F -702-751-8693

Branch Manager: Laura Gomez
Branch Email: sales-las@somcllc.com

### SOMC Dallas, TX

8300 Sovereign Row Dallas, TX 75247 P- 469-214-4144 F -214-740-2175

Sales Manager – Raquel Chavez Email: rchavez@somcllc.com

Branch Email: sales-dfw@somcllc.com

## SOMC San Antonio, TX

5720 Business Park San Antonio, TX 78218 P- 210-504-3777 F -210-504-3776

Branch Manager – Valentin Lucero

Email: vlucero@somcllc.com

Branch Email: <a href="mailto:sales-sat@somcllc.com">sales-sat@somcllc.com</a>

# **Dealer Application**

# Please note this is for a C.O.D account only

Business Name:	Phone:		Fax:		
Mailing Address:	City:	State:	County:	Zip	
Physical Address:	City:	State:	County:	Zip	
Email:	nail:Website Address:				
Corporation ( ) Partnership ( ) Sole Proprietor ( ) State of Incorporation ( ) Year Established Fed Tax ID #					
If subsidiary or branch: Name and address of parent company					
Under present ownership since: P.O. Required: Yes / No? Taxable? Yes / No Resale Number					
Sales Tax will be charged unless a properly completed Sales and Use Tax Resale Certificate Exemption Form is attached.					
Type of Business:	pe of Business:Estimated Screen Volume (\$)				
**Driver's License #	Ctata				
**Driver's License #State:					
**Please send a photo copy of driver's license. This is required to pay by check. **					
Applicant's Printed Name:	Tit	:le:			
Applicant's Signature:Date:					
OFFICE USE ONLY					
Dealer Approved Y / N Assigned Salespe	erson:		Тах	able? Yes/No	
Driver's License Photo ID Provided: Y / N? Supplying Branch: SATX LV DFW					
Special Notes:					

\*\*Note Custom screen orders of \$5,000.00 and more subject to half (50%) down payment prior to manufacturing and remaining balance due upon completion for a COD account or thirty (30) days from final invoice on Net 30 accounts.\*\*