



PRINT FORM, FILL OUT AND SUBMIT TO:
PT.MARKETING@SAFEFLEET.NET

ACCOUNT PROFILE Date: / /

Company:			Web:		
Officer - First:		Last:		Title:	
Main Phone:			Main Fax:		
Bill To:			Ship To:		
Bill To Address:			Ship To Address:		
City:	State:	Zip:	City:	State:	Zip:
Ship To Phone:			Ship To Fax:		
Financial Officer (Controller) - First:				Last:	
Email*:			Fax:		

General Information

Trade Association Membership(s):
Geographic Area Served:
Sales via Outside Sales: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, how many?
Sales via Over-the-Counter: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which tarps/tarp motor brand(s)?
Sales via Website: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which tarp brand(s)?
Replacement Tarp Sales: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which brand(s)?
Tarp System Installation: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which brand(s)?

Key Contact Information*

President/GM/Owner:	Email:
Sales Manager:	Email:
Parts Manager:	Email:
Purchasing Manager:	Email:
Shop Manager:	Email:
Sales: Inside <input type="checkbox"/> Outside <input type="checkbox"/>	Email:
Sales: Inside <input type="checkbox"/> Outside <input type="checkbox"/>	Email:
Sales: Inside <input type="checkbox"/> Outside <input type="checkbox"/>	Email:
Sales: Inside <input type="checkbox"/> Outside <input type="checkbox"/>	Email:
Sales: Inside <input type="checkbox"/> Outside <input type="checkbox"/>	Email:

* Pulltarps uses email to communicate important notifications, product updates and a periodic newsletter to our distributor accounts. Providing your email implies your opt-in permission. A confirmation email will be sent after your account is approved. Please be sure to add pt.marketing@safefleet.net to your safe sender list to ensure you receive these communications. Your email will never be shared with a third party and you may opt out at any time.





What do you consider your primary business function(s) to be? (Check all that apply)

<input type="checkbox"/> Truck Equipment	<input type="checkbox"/> Truck Dealer	<input type="checkbox"/> Trailer Builder
<input type="checkbox"/> Solid Waste Equipment	<input type="checkbox"/> Trailer Dealer	<input type="checkbox"/> Body Builder
<input type="checkbox"/> Hooklift/Crane Equipment	<input type="checkbox"/> Heavy Duty Parts	<input type="checkbox"/> Roll-Off Builder
<input type="checkbox"/> Tarp Fabricator	<input type="checkbox"/> Service & Repair	<input type="checkbox"/> Other:

What are the primary market(s) you serve?

<input type="checkbox"/> Construction	<input type="checkbox"/> Solid Waste	<input type="checkbox"/> Other:
<input type="checkbox"/> Highway Construction	<input type="checkbox"/> Scrap/Recycling	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Demolition	<input type="checkbox"/> Municipal	<input type="checkbox"/> Bulk Commodities

What are your primary Open Top Trailers and Bodies brands?

End Dumps	1.	2.
Side Dumps	1.	2.
Belly Dumps	1.	2.
Live Bottoms	1.	2.
Grain Trailers	1.	2.
Dump Bodies	1.	2.

What are your primary Detachable Container Hoist brands?

Cable Roll-Off Trailers	1.	2.
Cable Roll-Off Hoists	1.	2.
Hooklift Hoists	1.	2.
Lugger Hoists	1.	2.

What are the projected purchases for this Account? Year 3:

\$ _____

Pulltarps New Account

Requested by:	Date: / /
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Pulltarps Account Authorization

General Manager:	Date: / /
Pulltarps Credit Application Sent:	Date: / /