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Upon Completion, please fax back to Lee's Aquarium at **1-760-744-5909** or
email to custserv@leesaqpet.com

Distributor Application

(Please print or type)

Company Name: _____

Mail Address: _____

Ship Address: _____

City, State, Zip: _____

Country: _____

Phone # (_____) _____ Fax #: (_____) _____

DUNS Number: _____

Authorized Buyer(s) / Contact Person(s):

Email Address: _____

Product Line: (Please circle all applicable categories)

AQUARIUM *BIRDS/DOGS* *CATS* *REPTILES* *LAWN & GARDEN*

Other(s): _____

Number of Years in Business? _____

Do you sell: Wholesale? Cash & Carry? Only to your own stores? Retail?

As a wholesaler, do you primarily sell to independent retailers or chain stores?

Number of accounts? _____ Number of your own stores? _____

When do you publish your catalogs? _____

Briefly indicate the territory you service: (Attach map if available)

List the names of the major lines you now buy direct:

Any additional details may be put on the reverse of this page or attached separately.

Signature: _____ Title: _____
Please print name as signed: _____

Please advise which item(s) and quantities you would be interested in purchasing.

Please fax back to Lee's Aquarium at 1-760-744-5909 or email to custserv@leesaqpet.com
We will review your information and get back to you.

Thank You,
Lee's Aquarium Products