



P.O. Box 100, Dothan, AL 36302  
 1-800-533-3377 Fax 1-334-793-5179  
 WWW.JEFFERS.COM

# Wholesale Application

Date: \_\_\_\_\_ Customer #: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**APPLICATION DOES NOT  
ESTABLISH A CREDIT ACCOUNT!**

**Preferred method of contact:**

Email  Telephone  Fax

**SHIPPING ADDRESS:**  Mark if same as above

Company Name: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Current Suppliers: \_\_\_\_\_

**TYPE OF BUSINESS:**

- |                                     |  |  |                                       |
|-------------------------------------|--|--|---------------------------------------|
| <input type="checkbox"/> Pet Retail | <input type="checkbox"/> Kennel/Boarding | <input type="checkbox"/> Tack Shop     | <input type="checkbox"/> Amazon Sales |
| <input type="checkbox"/> Grooming   | <input type="checkbox"/> Veterinarian    | <input type="checkbox"/> Farm/Ranch    | <input type="checkbox"/> Ebay Sales   |
| <input type="checkbox"/> Training   | <input type="checkbox"/> Feed Store      | <input type="checkbox"/> Website Sales | <input type="checkbox"/> Other: _____ |

Back Orders Accepted?  Yes  No

(In the event an item is out of stock, all other available items will be shipped.  
 As soon as the out-of-stock item becomes available, it will then be shipped to you.)

Which Jeffers Catalog(s) would you like to receive?

Pet  Equine  Livestock

Sales Tax, EIN or Retail License #: \_\_\_\_\_

PLEASE ATTACH A COPY OF SALES TAX, EIN or RETAIL LICENSE. PLEASE ATTACH A NON-PROFIT LETTER (if applicable).

- Please note: Jeffers is unable to provide product data spreadsheets, UPC numbers or CSV files at this time.
- Also note: Sales on marketplace channels (i.e. Ebay or Amazon) should be approved prior to listing.

Don't forget to register online with your email address & password to expedite the registration process.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**RETURN COMPLETED FORM TO:**

Stacey Birge (ext 2347): sbirge@jefferspet.com