

**INTERNATIONAL PROFESSIONAL DISTRIBUTOR  
ACCOUNT AND CREDIT APPLICATION**

**BUSINESS CONTACT INFORMATION**

Name:		Zarc Acct No:	
Company name:		Rep:	
Country:		Acct Type:	
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Website:			
Federal Tax ID:		State Sales Tax Number:	
Date business commenced:			
Dunn and Bradstreet Number:		Sole proprietorship	Partnership Corporation
Number of Employees:	Number of Outside Reps:	Est. Annual Pepper Spray Sales:	

**Accounts Payable Contact**

Accounts payable contact:			
Address:			
City:		State:	ZIP Code:
Telephone:	Fax:	E-mail:	

**TERRITORY COVERED**

--	--	--	--

**SHIPPING ADDRESSES**

Physical Address:			
Address:			
Point of Contact:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Freight Forward Company:			
Address:			
Point of Contact:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	

**Best Airport**

**Best Sea Port**

Airport Name:			Sea Port Name:		
Address:			Address:		
City:	State:	ZIP Code:	City:	State:	ZIP Code:

**AGREEMENT**

We require that all new customers applying to do business with Zarc International, Inc read and accept our Terms and Conditions. If you agree with its conditions, please sign below. By signing, you state that you have read our Terms and Conditions and that you fully accept its terms and provisions in full without reservations. Signing/submitting this application authorizes the above references to release the applicable credit information.

**SIGNATURES**

<p>-----</p>		<p>-----</p>	
Title:	Date:	Title:	Date: