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Dealer Application

Business Name _____

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Contact Person _____

Email _____ Phone _____

Fax _____ Website Address _____

Type of Business Wine Retailer Winery Online Store

Other Retailer Other: _____

My business address for product shipment is Residential Commercial

Number of Stores _____ How did you hear about us? _____

Additional Notes _____

