Email Form

Sales Partner Application

First Class Lighting
4307 Del Prado Blvd
Cape Coral, FL 33904
P 239.541.8670 • F 239.541.8671
www.moonlight-inc.com

APPLICANT NAME				BUSINESS OWNER NAME		DATE
BUSINESS NAME				TAX ID OR RESALE #		
BUSINESS ADDRESS				CITY	STATE	ZIP
BUSINESS WEBSITE			TEL	FAX	EMAIL	
YEARS IN BUSINESS	NUMBER OF EMPLOYEES	NUMBER OF BRANCHES/OFFICES	BUSINESS CORPORATION TYPE		SALES REGIONS/BRANCH LOCATIONS	
IS THIS BUSINESS A SUBSIDIARY OF A LARGER CORPORATION? ☐ YES NO			NAME OF PARENT CORPORATION			

BUSINESS TYPE (CHECK ALL THAT APPLY)

PRODUCT INTEGRATOR
- ☐ LIGHTING DESIGNER
- ☐ LANDSCAPE DESIGNER
- ☐ INTERIOR DESIGNER
- ☐ LIGHTING CONTRACTOR
- ☐ COMMERCIAL DEVELOPER
- ☐ ARCHITECT
- ☐ MUNICIPAL PLANNER

RESELLER
- ☐ LIGHTING DEALER
- ☐ DISTRIBUTOR
- ☐ EVENT RENTAL AGENCY
- ☐ EVENT PLANNER
- ☐ FLORIST
- ☐ FURNITURE DEALER

OTHER (NOT MENTIONED ABOVE)_____

RETAIL
- ☐ ONLINE RETAIL
- ☐ BRICK & MORTAR RETAIL
- ☐ FURNITURE STORE
- ☐ LIGHTING STORE
- ☐ POOL AND SPAS

WHO IS YOUR PRIMARY FOCUS CLIENT? ☐ COMMERCIAL ☐ RESIDENTIAL

PLEASE TELL US ABOUT YOUR BUSINESS AND RELEVANT PROJECTS

I certify that I am an authorized representative of the company stated above, legally able to conduct business in the United States. All statements made by me in this application are correct to my knowledge.

X _____ SIGNATURE

_____ DATE