

1406 W. Kings Hwy. Gap, PA 17527 717.869.2775

## APPLICATION AND AGREEMENT FOR ACCREDITED DEALER/INSTALLER

APPLICANT & Name of Business	
ADDRESS:	EIN#
Multiple Offices: Please List Locations	
PHONE:	
EMAIL & Web site	
STATE(S) OF REGISTRATION:	
INSURER:additional insured)	(Attach proof of existing coverage listing Bullistic Barriers as
What is your main geographic area?	
AFA:IDEA:NOMMA:BBB:	
Years in Business: Years at this location:	
Any type of fence, gate or door accreditation? Please in	dicate:
Are you involved in any Philanthropic events: Please In	dicate:
<ul> <li>Upon Applicant's certification by the Company, which may be denied or retter sale and installation of Company products (with any such contracted we to supply Company products to Applicant, Applicant agrees to the following 1. Applicant will be provided and shall adhere to the installation of the company. Company may referred the of work, contract terms, and other information prior to the company of work, contract terms, and other information prior to the company of work, contract terms, and other information prior to the company is applicant shall indemnify and hold Company harmless from an result of the Company's negligence.</li> <li>5. Applicant acknowledges that Company may rescind certification</li> </ul>	ded by Bullistic Barriers LLC, a Pennsylvania limited liability company ("Company"). escinded for any reason by the Company, Applicant shall be permitted to coordinate work referred to herein as a "Project" or "Projects"). In order to induce the Company ing terms: guidelines and specifications for all Company products. Any material deviation from om time to time, shall be approved in writing by Company, or any warranty shall be mply with all documentation requirements of the Company, which may be changed equire Applicant to provide Project site specific details, customer information, scope
Intending to be legally bound, Applicant agrees to the above terms and su	ubmits this Application to the Company for accreditation:
APPLICANT	
By: Print Name / Title:	Date:
	edited the Applicant to install Company products as of the date below written:

BULLISTIC BARRIERS LLC

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

Amos Glick, Authorized Member

By: