



Contractor Wholesale Application

Company Name: _____

Owner's Name: _____

Address: _____

Office Ph: _____ **Cell Ph:** _____

Fax #: _____ **Email:** _____

Are you licensed in any trades? _____ If Yes, What trades? _____

What percent of your sales is cabinetry? _____

Will Fabuwood be your primary cabinet line? _____

Do you have the ability to receive and assemble cabinetry? _____

What is your average number of kitchens installed in one month's time? _____

Do you currently sell any cabinetry lines? _____ If Yes, what lines? _____

What are your biggest complaints in the cabinetry trade? _____

Print Name: _____ **Signature:** _____

Comments: _____
