

SKY RABBIT CNC

Trade Account Application

Thank you for your interest in opening a trade account with Sky Rabbit CNC. Please complete this form and return it via email or in person. Trade accounts are available to licensed professionals only.

BUSINESS INFORMATION

Business Name: _____

Business Address: _____

City: _____ **State:** _____ **ZIP:** _____

Phone: _____ **Email:** _____

Website (if applicable): _____

PRIMARY CONTACT

Contact Name: _____ **Title/Role:** _____

Cell Phone: _____ **Email (if different):** _____

BUSINESS DETAILS

Type of Business (check all that apply):

- | | | |
|--|--|---|
| <input type="checkbox"/> Kitchen & Bath Remodeler | <input type="checkbox"/> General Contractor | <input type="checkbox"/> Interior Designer |
| <input type="checkbox"/> Home Builder | <input type="checkbox"/> Handyman / Installer | <input type="checkbox"/> Closet / Garage Specialist |
| <input type="checkbox"/> Property Manager / Investor | <input type="checkbox"/> Cabinet Dealer / Reseller | <input type="checkbox"/> Other: _____ |

Years in Business: _____

Estimated Kitchens/Projects Per Year: _____

Contractor License # (if applicable): _____

How did you hear about Sky Rabbit CNC?: _____

CABINET PREFERENCES

Construction style you typically specify:

- | | | |
|---|---------------------------------|---|
| <input type="checkbox"/> Frameless (Euro) | <input type="checkbox"/> Framed | <input type="checkbox"/> Both / No preference |
|---|---------------------------------|---|

Door styles of interest:

- | | | |
|------------------------------------|---------------------------------|---------------------------------------|
| <input type="checkbox"/> Flat Slab | <input type="checkbox"/> Shaker | <input type="checkbox"/> Other: _____ |
|------------------------------------|---------------------------------|---------------------------------------|

Typical finish requirement:

- | | | |
|---|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Painted (specify brand preference) | <input type="checkbox"/> Unfinished | <input type="checkbox"/> Other: _____ |
|---|-------------------------------------|---------------------------------------|

AGREEMENT

By signing below, I confirm that the information provided is accurate and that I am a trade professional or authorized representative of the business listed above. I understand that trade pricing is confidential and intended for professional use only.

Signature: _____

Date: _____

Printed Name: _____

Return this form to: Sky Rabbit CNC | Cibolo, TX | (210) 941-1516 | skyrabbitcnc.com