

Global Millennia Marketing, Inc. Reseller Application

(Please type or print clearly)

Business Names		
Business Legal Name:	DBA Name:	
Mailing/Billing Address:		
City, State, Zip:		
Contact Name:		
Phone Number: ()	FAX Number: ()	Email Address:
Location Address (If different from Mailing):		
City, State, Zip:		
Contact Name:		
Phone Number: ()	FAX Number: ()	Email Address:
Business Information		
Ownership Type: <input type="checkbox"/> Sole Prop. <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other: _____		TaxID's # _____
Business Open Date:	Length of Current Ownership:	Expected Software Sales/Month:
Services Provided (Select All That Apply): <input type="checkbox"/> Internet Service Provider <input type="checkbox"/> Web Site Hosting <input type="checkbox"/> Virtual Hosting <input type="checkbox"/> Web Design <input type="checkbox"/> Dedicated Hosting <input type="checkbox"/> Co-locations		
How many clients do you currently provide e-commerce solution for?		
What general physical geographic area do you service?		
Does your company currently offer any e-commerce software services? If Yes, please list:		
Does your company currently offer any credit card payment solution services? If Yes, please detail:		
Is there anything else we should know to help you sell IMScart [®] software successfully?		
The parties hereto agree to each of the terms and covenants set forth in the Reseller Agreement and acknowledge that such provisions are binding upon each, their successors, heirs and assigns. In witness whereof, Reseller hereto sets its hand as of this date.		
Signature: _____ Title: _____ Name: _____ Date: _____		
Signature: _____ Title: _____ Name: _____ Date: _____		