



Mailing Address: 22365 El Toro Rd. # 231
Lake Forest, CA 92630
Phone: 1-888-211-2288 | Fax: 949-707-1443
Email: sales@worldyecam.com
Web: www.worldyecam.com

CONFIDENTIAL DEALER/RESELLER APPLICATION

Name: _____

Billing Address: _____

Shipping Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax:** _____

Email: _____ **Website:** _____

Federal Tax ID: _____

Estimated Monthly Credit Required: _____

Quarterly Projected Sales: _____

World EyeCAM Sales Contact: _____

Sales Contact: _____ **Purchasing Contact:** _____

Type of Business:

- ☐ Security Contractor ☐ Corporate Reseller ☐ Distributor-Security
☐ Distributor-Network/PCs ☐ I.T. Network Contractor
☐ Other (Specify) _____

Names and Titles of Officers/Owners/Partners:

1. _____ Title: _____
2. _____ Title: _____
3. _____ Title: _____

Bank Reference:

Bank: _____ **Account #:** _____

Address: _____

Contact: _____ **Phone:** _____



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Trade References:

1. Name _____ Account #: _____
Address _____
Contact _____ Phone: _____
Fax: _____
2. Name _____ Account #: _____
Address _____
Contact _____ Phone: _____
Fax: _____
3. Name _____ Account #: _____
Address _____
Contact _____ Phone: _____
Fax: _____

World EyeCAM Terms and Conditions:

- As a dealer there will be no refunds on complete systems or DVR cards, unless otherwise defective.

As a dealer you are responsible for the evaluation of the DVR product BEFORE installation, service, or sale to your customer/client.

If you inspect that your DVR product is, or has become defective, you may return it for a prompt exchange. However, you must call technical support for an RMA # before doing so.

If you return a DVR card back to World EyeCAM, and it is not found defective there will be a \$25.00 diagnostic fee.

Cameras, lenses, power supplies, etc. will come with the standard manufacturers warranty and may be exchanged and/or returned.

All items returned will have a 15% restocking fee.

World EyeCAM does not handle third party customer support issues, we only deal directly with the dealer that purchased the item(s).

10 item minimum purchase required.

By signing below, I attest that the information on this application is accurate and I agree to World EyeCAM's Terms and Conditions.

Application Date: _____ Name: _____

Signature: _____