



Online Sales Application and Agreement

*Please review all sections of the **E-Tailer Selection Policy** prior to completing this form. Your signature on this form indicates that you have read and acknowledge the Rinnai E-Tailer Selection Policy.*

*Only completed applications will be considered. Please submit your completed application to **bsheets@rinnai.us**.*

Rinnai America Corporation reserves the right, in its sole discretion, to approve, withhold or withdraw its authorization of online retailers and/or modify the selection policy.

Application Form

Company Profile

Company Name _____

Name of Primary Contact _____

Job Title _____

Company Address 1 _____

Company Address 2 _____

City _____

State _____

Zip _____

Email _____

Phone _____

Purchases (in \$) of Rinnai products in the past 12 months _____

eBusiness Details

Do you sell exclusively online (or also via brick and mortar stores)? _____

When did you start selling online? _____

Please list all website(s) where you plan to sell Rinnai products:

Website	Does site currently sell Rinnai product(s)?	Customer Service Hours:	Return Policy:

Supplier Details

Name(s) and address(es) of the person(s) or entities from which Applicant purchases Rinnai Products:

Supplier Company Name	Supplier Address

Signature:

I certify that the details in this Application are accurate and complete and that if any of the above information changes, an updated form will be submitted to Rinnai America Corporation.

Signature: _____

Name (please print): _____

Position/Title: _____

Date: _____