

Kryptonik Software 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:

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Email Address:

Location Address (If different from Mailing):

City, State, Zip:

Contact Name:

Phone Number:

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FAX Number:

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Email Address:

Business Information

Ownership Type:

Sole Prop. Partnership Corporation Other: _____

Federal TaxID # (9 digits)

Business Open Date:

Length of Current Ownership:

Expected Software Sales/Month:

Services Provided (Select All That Apply):

Internet Service Provider Web Site Hosting Virtual Hosting Free Email Dedicated Hosting Co-locations

How many clients do you currently provide general Internet connections for:

How many clients do you currently provide general Web Hosting connections for:

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 Kryptonik 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: _____