



**SOLAR  
ELECTRIC  
SUPPLY, INC.**

TOLL FREE (877)297-0014  
DIRECT (831)462-8243  
FAX (831)462-8246

## Contractor/ Dealer Application

Business Name:	Date:
Address:	Phone:
City, State, Zip:	Fax:
Owner Name:	Project manager:
Email:	
Type of Business:	
Time in Business: ___yrs	Number of Employees:
Contractor Type:	
Time at Present Location:	
Contractor License Number:	
Business License Number:	
State Resale License Number:	
What Percentage of your Business is Grid-Tie Solar?	
What Percentage of your Business is Off-Grid or Remote Home?	
What Percentage of your Business is Commercial Grid-Tie?	
What Percentage of your Business is Solar Related?	
Purchase Time Frame?	
Years of Solar Installation Experience:	
Intended Market: Residential Grid-Tie ___ Commercial Grid-Tie ___ Remote Industrial ___ Government ___	
Remote Home/ Off Grid ___ New Home ___	
Please include a copy of your Business, Contractor, or State Resale License	
This is Required for Application Processing and Wholesale Pricing	

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