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| **KRUWEAR Wholesale Application** |
| Applicant Information |
| Name of Company: |
| Tax Identification Number: |
| Name of Main Contact: | **Title:** |
| Wholesale Program of Interest (Circle all that apply): |
| The Kruwear Brand Private Label Closeout Discounts |
| Main Address: |
| City: | **State:** | **ZIP Code:** |
| Phone Number: | **Email Address:** |
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| For Brick and Mortar Applicants |
| How many store locations do you currently operate: |
| Store address(s): | **Years in Business:** |
| City: | **State:** | **ZIP Code:** |
| Website Address: |
| Brands Stocked (all categories): |
| Markdown/Sale Frequency: | **Typical Discount Offered:** |
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| Please provide photos of your store along with your application. |
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| For Online Only Applicants |
| Website address(must be active): |
| Physical Address: | **Years in Business:** |
| City: | **State:** | **Zip Code:** |
| Brands Carried (all categories): |
| Markdown/Sale Frequency: | **Typical Discount Offered:** |
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| Additional Information to be considered (optional) |
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| Please submit your completed application along with store photos to wholesale@kruwear.com for review. You will receive a response to your application within 5 to 10 business days. |