



PREGRA APPLICATION
Please fill out, sign, and return to fax # 877-477-3472

Company Quick Facts

Company Name _____
Street Address _____
City _____ State _____ Zipcode _____

Primary Contact _____
Email _____ Phone # _____
Owner _____ Phone # _____

F-Y-I

To receive National Account Leads, your company must have the following 4 items current, complete & under the same company name. Or explain if your state does not require one or more of:

- 1. Contractor's License
- 2. Fed Tax ID
- 3. Insurance
- 4. Current Workers Comp or Equivalent

Compliance

YES NO

Do you meet your State's minimum insurance requirements?

Are you up to date and legal with your Workers' Compensation?

If Line 2 does not apply, then does your State allow your company to hire independent labor, etc.?

Is your company compliant and legally able to install artificial grass, as per your State's Regulations?

Do you have a Contractor's License?

Does your State require a Contractor's Licence to install artificial grass?

Contractor's License Number: _____ Federal Tax ID (Mandatory): _____

Company Details

Years in Business _____ Number of Employees _____

Warehouse sq. ft. _____ Dock Height _____

Do you have a show room? _____ Can you handle 15 ft. rolls (Y/N) _____

Territory by Zip Code (up to 5 Zip Codes) _____

Territory by Area Code (up to 5 Area Codes) _____

How far (distance in miles) are you willing to travel? _____

Check One Box, Sign, and Fax back to: 877-477-3472

Installation: I certify that my company is compliant and legally able to install artificial grass as per my State's Regulations.

Non Installation: I certify that our company is only interested in reselling Pregra Products, not installing.

Printed Name: _____ Date: _____

Signature: _____ Date: _____

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Marketing Information

Is your company active in the following areas?

- Display at Trade Shows - Please List: _____
- Advertise on Radio or TV? _____
- Host Local Events - Please List: _____
- Print Advertise? - Please List: _____
- Are you a member of the BBB?
- Would your company like to explore the opportunity to participate in above activities?

If your answer is Yes to any of the following questions, Please explain type of business and products sold.

- Are you in the carpet installation industry?
- Are you in the landscape industry?
- Are you in the artificial grass industry?

Manufacturers and/or Brands you work with: _____

Manufacturers or Retailers who issue you work (ie: Home Depot, Lowes): _____

Dress code for bids: _____

Dress code on job site: _____

General References

Please provide references.

1. Name: _____ Email: _____
Phone: _____ Type of Job: _____ State: _____
2. Name: _____ Email: _____
Phone: _____ Type of Job: _____ State: _____

You may also provide photos. Please attach photos on a separate sheet.

Is there anything else you would like to tell us?

