



Wholesaler Request Form

Date: _____

Contact Name _____

Company _____

Billing Address _____

Shipping Address (if different than billing address)

Phone() _____ - _____ Email Address _____

Tax ID # _____

How did you hear about us? _____

Customer Type:

Restaurant Bakery Coffee Shop Retail Store/Grocery

Hotel/Casino Office Other: _____

Who is your current coffee provider? _____

Why are you considering changing providers and how can we service you better?

When would you like service to begin? _____

How often would you like coffee delivered? Weekly Bi-weekly Monthly

Will you require coffee brewing equipment?

Yes (If yes, which types of equipment? _____)

No (If no, which equipment do you currently use? _____)

How do you prefer to be contacted?

Blind Dog Office Use Only

Form received by: _____ Date: _____

Email

Phone

For regular deliveries, Blind Dog will contact you on Mondays to place your order. This is to plan our production & to ensure that you receive the freshest product possible. If you opt not to be contacted weekly, please consider providing us with advance notice. How would you like to order?

Blind Dog contacts you weekly (preferred)

Customer contacts Blind Dog when needed (submit to orders@blinddogcoffee.com)

Blind Dog delivers each week to local cities. If you are in one of the following areas, please check the box below. Otherwise, orders will be shipped by UPS or USPS.

N. Lake Tahoe/Truckee S. Lake Tahoe Carson Valley Reno/Sparks

Fernley/Fallon Grass Valley Other local request: _____

Product Preferences:

Organic Specialty Conventional

Whole Bean Ground (Specify grind : _____)

Coffee variety preferred: _____

Approximate pounds of coffee consumed weekly: _____

Request for meeting, questions or comments:

Customer Name _____ **Date** _____ **Signature** _____

Payments can be remitted to:

Blind Dog Coffee Roasters

1276 Pit Road, Suite 8

Gardnerville, NV 89460

Phone: 775-265-2176 Fax: 775-392-1975

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