



Vendor Application

Vendor Contact Information

Vendor Name: _____	Vendor Phone: _____
Vendor Address: _____	Vendor Email: _____
City/State/Zip: _____	Parent Company: _____
Vendor Rep: _____	Broker: _____
Phone: _____	Phone: _____
Fax: _____	Fax: _____
Email: _____	Email: _____
Normal Delivery Time: _____	Terms: _____
Minimum Order: _____	Extended Terms Available: _____
Pick up Allowance: _____	Truck Allowance: _____

Programs, Details, Amount, by Items: (Attach additional Sheet if needed)

Introductory Program Allowance: _____	Spoils Allowance: (% OI, BB): _____
Quarterly Allowance: _____	Salesman's Spiffs: _____
Slotting Policy: _____	Trade Show Support: _____
New Store Opening: _____	Advertising Allowance: _____
Active Demo Policy: _____	Scan Downs: _____
Floor Stock Protection: _____	Guaranteed Sale: _____
Sales Presentation Samples: _____	Website Support: _____
Are Items Organic? _____	If yes; Provide Certification...
Are Items Natural? _____	Are your items in Whole Foods Midwest? _____



Vendor Application

1. Attach POS and Product Spec Sheets on all Proposed Items. Please be certain that Ti & Hi, Cube, UPC, Pack Sizes, Case Cost, Case Size and Item Numbers are included.

2. List Distributors of your Products in the Midwest.

3. Do you sell accounts Direct?

4. Are your products offered to similar distributors on proportionately equal terms?