



WHOLESALE PROGRAM SIGN-UP

Registration Form

Please print:

Company: _____

Contact Name: _____

Title: _____

Mailing Address: _____

Office Phone: _____

Cell: _____

Email: _____

Website: _____

Business Type: (Please check all that apply)

Architect <input type="checkbox"/>	Builder <input type="checkbox"/>	Dealer <input type="checkbox"/>	Designer <input type="checkbox"/>
Developer <input type="checkbox"/>	Maintenance <input type="checkbox"/>	GC Residential <input type="checkbox"/>	GC Commercial <input type="checkbox"/>
Hospitality <input type="checkbox"/>	House Flip <input type="checkbox"/>	Tile Residential <input type="checkbox"/>	Tile Commercial <input type="checkbox"/>
Property Mgt <input type="checkbox"/>	Other <input type="checkbox"/>		

Please answer the following questions: Yes OR No

Do you do your own tile installations? _____

Do you have a showroom? _____

If yes, are you interested in showroom displays? _____

Are you interested in commercial samples? _____

Do you have granite/quartz countertop needs? _____

Signature _____ Date _____

VISIT US

www.tilemarketofde.com



Internal Use Only

Salesperson: _____

New Customer ID: _____

Contacted? _____

Corporate Headquarters
Tile Market of Delaware
405 E Marsh Lane
Wilmington, DE 19804
302-777-4663

Middletown Location
Tile Market of Delaware
110 Patriot Drive
Middletown, DE 19709
302-225-9656

Lewes Location
Tile Market of Delaware
17701 Dartmouth Drive
Lewes, DE 19958
302-644-7100