

FOUR HANDS

VIRTUAL WAREHOUSE Application

Existing Customer New Customer

Business Name: _____ Four Hands Account # _____

Billing Address: _____

Contact: _____ Phone: _____ Email: _____

Four Hands Account Manager: _____

Please select which product you are applying for:

Virtual Warehouse Online Weblink:

- I have placed an opening order of \$2500 **OR** I have purchased a minimum of \$2500 in the last 4 months.
- I understand that my account must be in goodstanding and will be reviewed for approval.
- To maintain the Virtual Warehouse, I understand my account must stay active with orders greater than \$2000 yearly.

Pricing Multiplier: _____ (x) Stocking Dealer or Quick Ship (Please Circle One)

Virtual Warehouse Kiosk Equipment:

- I have placed an opening order of \$2500 **OR** I have purchased a minimum of \$2500 in the last 4 months.
- I understand that my account must be in goodstanding and will be reviewed for approval.
- I agree to pay the \$500 equipment deposit. The equipment will be shipped to the address provided 2 weeks after the deposit is received.
- I have read and accepted the Equipment Agreement and Credit Card Deposit form.
- I would like to sign up for EZPay which is subject to approval of terms. Four Hands strongly recommends this payment option for kiosk customers.

Pricing Multiplier: _____ (x) Stocking Dealer/ Non-Stocking Dealer/ Container/Quick Ship (Please Circle One)

For Kiosk Equipment only:

Kiosk Shipping Address:
(if different from above) _____

Technical Contact: _____ Phone: _____ Email: _____

What type of network do you have? Please select one.

If you have a combination network (both wired and wireless), please select the preferred network for your kiosk.

- Wired:** You have to use an Ethernet cord and plug into the wall to connect to the internet
- Wireless:** Your network is wireless and you do not have to plug into anything to access the internet. Once approved, we will contact you for any security pass phrases in order to connect the kiosk to your secured wireless network.

For internal use only:

Submittal Date: _____ Shipping deadline: _____
(Kiosk Manager) (Kiosk Manager)

Approval by: _____ Software setup _____
Controller completed on:

Kiosk Web Address: _____
www.lifestyleshowroom.com/

Actual Ship Date: _____ Tracking # _____