Form RD 1944-5 (Rev. 12/98)

USDA - Rural Development

RURAL DEVELOPMENT MANUFACTURED HOUSING DEALER-CONTRACTOR APPLICATION								
TO: (Rural Development)					Date			
As provided in 7 CFR Part 3550, this application is	s submitte	ed for your	approval as a	Dealer-Contractor.				
						Ownership		
Tax Identification # Trade Name	Prione Number		Phone Number	•				
Number and Street				Date Business Established	SOLE PROPRI	ETORSHIP ERSHIP		
City, Zone, State				Years at Present CORPORATION Address		RATION		
Previous Address		Years at Previous Address	Number of Sales Personnel					
Type of Business (General Contracting, Lumber Yard, Heating, etc.)				Date Financial Statement	Identify Sales Personnel on Separate Attached Sheet			
IF NOT A S	SOLE PA	RTNERSH	IIP, IDENTIF	Y PRINCIPALS				
Name 1.	Title			Home Address				
2.								
3.								
EMPLOYMENT HISTORY OF PRINC	IPALS FO	OR PAST	TEN YEARS (If more space is needed, us	e an attached s	heet)		
1.								
2.								
3.								
Bank of Deposit								
CREDIT REFERENCES						ates		
		L 4 11			From	То		
Name		Address			Year	Year		
TRADE REFERENCES: (NAME PRESENT ANI	D PREVIO	OUS SUPP	LIERS OF M	AJOR PRODUCTS)	•			
Names			Address					
70								
If any work is subcontracted, give type of work and trade na	ame of subc	contractor.						

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Sales Area				No. of Branches
Addresses of Branches				
Describe any Guaranty Given Buyers				
(we) hereby understand that I(we) am (are) fully be followed, and that immediate attention will be statements are true. I(we) understand this applica	e given to all complaints involvin	g materials, workmanship or sales	•	
Trade Name		By: (Name and Title)		
/We hereby authorize the Rural Housing Servic he previous page, on a recurring basis as may be		*		le proprietor, referred to on
Signature of Individual Principal or Sole Proprietor	Social Security Number	Signature of Individual Prin Sole Proprietor	ncipal or S	Social Security Number
Signature of Individual Principal or Sole Proprietor	Social Security Number	Signature of Individual Pri Sole Proprietor	ncipal or	Social Security Number
	FOR USE BY RUR	AL DEVELOPMENT		
CREDIT REPORT(S)	TORESEDIRE	ALL DE VEROT METAT		
ATTACHED	☐ TRADE REFERENCES	CHECKED	CREDIT REFERI	ENCE(S) CHECKED
REPORTED DATED:	SALES LITERATURE		COPY OF CONT	
Place of Business Inspected by: (Name and Title	RECEIVED e)		SALES AGREEM Date In:	
Remarks:			_	
The dealer-contractor whose application app dealer-contractor is reliable, financially resp customer.				
Dealer-Contractor Approved (Date)	By: (Name and Title)			