

W.T.F. Silencers Dealer Application Form

Thank you for your interest in becoming a non-exclusive dealer for Wyoming Tactical Firearms LLC, DBA "W.T.F. Silencers." This application must be completed and submitted prior to entering into a Dealer Sales Agreement. Approval is subject to verification of your compliance with all applicable federal, state, and local laws, including those enforced by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF). Upon approval, you will be provided with the Dealer Sales Agreement for signature.

Please provide accurate and complete information. Submit this form along with a copy of your Federal Firearms License (FFL) and any other required documentation to: **Wyoming Tactical Firearms LLC** 31 Callen Dr, Cody, WY 82414 Email: office@wtfwyo.com

Date of Application: _____

Section 1: Business Information

- **Business Legal Name (Dealer Name):** _____
- **DBA (Doing Business As), if applicable:** _____
- **Business Type:** Individual LLC Corporation Partnership Other (specify): _____
- **Business Address:** Street: _____ City: _____
State: _____ ZIP: _____
- **Mailing Address (if different):** Street: _____ City: _____
State: _____ ZIP: _____
- **Phone Number:** _____
- **Email Address:** _____
- **Website URL (if applicable):** _____
- **Preferred Territory/Region for Sales (e.g., specific state(s), region, or "the United States"):** _____

Section 2: Contact Person Information

- **Primary Contact Name:** _____
- **Title/Position:** _____
- **Phone Number:** _____
- **Email Address:** _____

Section 3: Licensing and Compliance

- **Federal Firearms License (FFL) Number:** _____ (Attach copy)

- **FFL Expiration Date:** _____
- **Special Occupational Tax (SOT) Status (required for NFA items like silencers):** Class 2 (Manufacturer) Class 3 (Dealer) Other (specify): _____
- **Do you hold all necessary state and local licenses for selling firearm silencers?** Yes No If yes, list relevant licenses: _____
- **Confirmation of Compliance:** I certify that the business complies with all applicable federal, state, and local laws, regulations, and licensing requirements, including ATF rules governing the sale of firearm silencers. Yes

Section 4: Business Operations

- **Years in Business:** _____
- **Type of Business:** Retail Firearms Store Online Retailer Gun Show Vendor Other (specify): _____
- **Estimated Annual Sales Volume for Firearm Accessories/Silencers (optional):** _____
- **Preferred Payment Method for Orders:** Check ACH Credit Card (note: 3% fee applies)
- **Do you agree to adhere to the Supplier's Minimum Advertised Price Policy (MAPP)?** Yes No
- **Do you have experience selling NFA-regulated items (e.g., silencers, suppressors)?** Yes No If yes, briefly describe: _____
- **Average Amount of NFA items (suppressors) sold monthly (EST)** _____

Section 5: References (Optional but Recommended)

- **Business Reference 1:** Name: _____ Company: _____
Phone: _____
- **Business Reference 2:** Name: _____ Company: _____
Phone: _____

Section 6: Acknowledgments and Signature

By signing below, I acknowledge that:

- All information provided is true and accurate.
- I understand that approval as a dealer is non-exclusive and subject to the terms of the Dealer Sales Agreement.
- I agree to maintain confidentiality of any proprietary information provided during the application process.

- I consent to a background check or verification of licensing as needed.

Signature: _____ Printed Name: _____
Title: _____ Date: _____

Next Steps: Upon receipt, we will review your application and contact you within [10] business days. If approved, you will receive the Dealer Sales Agreement, current price list, MAPP schedule, and any promotional materials. Thank you for applying!