

SHERWIN-WILLIAMS SERVICING BRANCH

Branch #:	Area #:	Territory #:
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SHOP INFORMATION (Please complete all sections of application)

Shop Name:	(Branch Charge Account) POS Account #
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Street Address:
Mailing Address: (if different from Street Address - P.O. Box Address)

City:	State/Province:	Postal Code:
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Telephone #:	Fax #:
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E-Mail Address:

<input type="checkbox"/> Independent Shop	<input type="checkbox"/> Dealership	Estimated Annual GOM Sales:
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TYPE OF PAYMENT

- Check for \$995 made payable to Sherwin-Williams or;
- Future A-Plus™ Rewards Points Earnings Payment **(Must Initial Letter of Agreement Section below)**
Letter of Agreement: (Only applies to Future A-Plus™ Rewards Points Earnings Payment Option if Checked)
 I/We understand that the initial 1,400 A-Plus™ Rewards Points we earn ("Enrollment Points") shall be applied toward the A-Plus™ Rewards Enrollment Fee. **Initial here:** _____
- Check for \$595 made payable to Sherwin-Williams for each additional shop location enrolled in the program
- Redeem 800 Future A-Plus™ Rewards Points for each additional shop enrolled from POS Acct. # _____ 800
- Future A-Plus™ Rewards Points for each additional shop enrolled

NOTE: An annual renewal fee of \$495 will automatically be deducted from the member's A-Plus™ Rewards Points balance on the membership anniversary date. If Member sells, transfers, or otherwise disposes of business, all A-Plus™ Rewards Points shall be forfeited. A-Plus™ Rewards Points are non-transferrable.

An automatic forfeiture of A-Plus™ Rewards Points will occur for any member that: 1) is not actively purchasing Sherwin-Williams paint products*; 2) removes Sherwin-Williams paints or coatings from its operations, or 3) does not maintain a valid credit account in good standing with Sherwin-Williams.

*Includes only paint products manufactured by Sherwin-Williams.

Mail Application & Check to:
Sherwin-Williams - A-Plus™ Rewards
4440 Warrensville Center Road
Warrensville Hts., OH 44128-2837

Sales Representative Name (Print)	Sales Representative Name (Signature)	Date
Area Representative Name (Print)	Area Sales Manager Name (Signature)	Date
Owner/Manager Name (Print)	Owner/Manager Name (Signature)	Date