



SKANUNU®

Thank you for your interest in becoming a Skanunu retailer! Please fill out our application form below then email it back to us at kk@skanunu.com. We'll review your information and get back to you promptly!

Store Name: _____

Tax ID License Number: _____

Years In Business: (MM/DD/YYYY) _____

Store Type: _____

Billing Address: _____

Shipping Address: _____

Phone Number: _____

Fax Number: _____

Buyer's Name: _____

Email Address: _____

Cell Number: _____

Website: _____

2500 Dallas Hwy SW, STE 202-173, Marietta GA 30064