

MERCHANT APPLICATION

Fields with asterisk (*) are required

*Business Name: _____

*Business Address: _____

*Business City: _____

*Business Zip Code: _____

Email: _____

*Phone Number: _____

*Specialty: _____

Business Website: _____

*Contact Name: _____

*Discount or Incentive: _____

Limitations or Considerations: _____

* _____ I/We are authorized to submit the above information to the Register of Deeds to take part in the Stanly County "Thank You For Your Service" Veterans' Discount Program.

Signature _____ Date _____