

Heart of Ohio Antique Center

Dealer Application

Name:			Date:	_//
Address:				
City:		State	:	Zip:
Telephone Number: (H	ome)	()	Mobile)	
E-Mail Address:				
Type of Space Desired:		☐ 10' x 10' booth☐ 20' x 11' booth☐	☐ 10' x 16' booth	☐ Showcase
	Please provide deta	illed information and a	answer all questions	<u> </u>
How long have you beer	n a dealer?			
What type of merchandi	se do you sell? (Be s	pecific)		
What are your average r you rent?	monthly sales in the m	nall(s) or show(s) you ar	e currently exhibiting	and what size space o
Mall		Space Size	Avg	. \$
Mall		Space Size	Avg	. \$
Mall		Space Size	Avg	. \$
Any other information yo	ou would like to tell us	about yourself to aid us	in considering your	application:

Thank you for your interest in becoming a dealer at the Heart of Ohio Antique Center. All applications will be processed by quality of merchandise, dealer experience and date received. Applications are not processed solely by date received and acceptance of your dealer application does not guarantee you a space at Heart of Ohio. All qualified applicants will be added to our waiting list and will be notified in advance of space openings. Please submit this application, along with any applicable photographs of merchandise you plan to exhibit, to: heartoffice@heartofohioantiques.com or: