



Dealer Application

Company Contact Information

Business Name: _____

Contact Person: _____

Address: _____

City: _____

State / Province: _____

Country: _____

Zip code / Postal code: _____

Phone number: _____

Fax number: _____

Website: _____

Email (for online account): _____

Company Billing Information (For Credit Card Payments – MUST BE EXACT)

Contact Person: _____

Address: _____

City: _____

State / Province: _____

Country: _____

Phone number: _____

Fax number: _____

Company Shipping Information (If different from Company Contact Information)

Contact Person: _____

Address: _____

City: _____

State / Province: _____

Zip code / Postal code: _____

Country: _____

Phone Number: _____



Credit Card Information (MUST BE EXACTLY AS ON THE CREDIT CARD)

CC Type (Visa, MC): _____

CC Cardholder Name: _____

Credit Card #: _____

Expiry Date: _____

3-4 Digit Panel Code #: _____

Company Profile

Years in Business: _____

Operating as: Proprietor Partnership Corporation (Check one)

Name of Business Owner: _____

Owner Phone Number: _____

Franchise Dealer: _____ What Brands: _____

Federal Tax ID #: _____

State Business License #: _____

State Tax ID #: _____

State Resale License #: _____

Finding MotoWheels

How did you find out about Motowheels? _____

Which Motowheels products interest you? _____

Trade References

Name: _____ Account #: _____ Phone: _____

Name: _____ Account #: _____ Phone: _____

Name: _____ Account #: _____ Phone: _____

Signature: _____ Date: _____