



## Dealer Application

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Contact Person \_\_\_\_\_

www. \_\_\_\_\_

Resale # \_\_\_\_\_

### Motorcycle Business References

Name \_\_\_\_\_ Phone \_\_\_\_\_ Acc# \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Acc# \_\_\_\_\_

Owners Signature \_\_\_\_\_ Date \_\_\_\_\_



**In order to process your dealer application we will need the following information.**

**A: Copy of your resale number or sellers permit.**

**B: Copy of ad from phonebook or magazine.**

**C: Picture of retail store.**

**If you have any questions please don't hesitate to call our office.**

**Sincerely,**

A handwritten signature in black ink, appearing to be 'P. Lindby', written in a cursive style.

**Per Lindby**