

DEALER APPLICATION



Date \_\_\_ / \_\_\_ / \_\_\_

OUR WHOLESALE POLICY :

ZIPPER'S PERFORMANCE PRODUCTS can only supply parts at wholesale prices to bona-fide, full-time motorcycle shops. Our definition of full time: open at least five days per week, daytime hours, a store front (not a garage, basement or barn) that is in the business of repairing, machining and repairing motorcycles and parts. We understand that legitimate business owners pay rent, taxes, insurance, etc and must make profits to stay in business. Unfair competition from backyard operations or racers looking for a better deal makes this more difficult for legitimate operations to compete.

Please help us qualify your operation for dealer pricing. We require that you supply all the information requested. Please do not be offended if you have been in business for twenty years and don't feel you need to qualify your shop with all this information. If all wholesalers went to this trouble there wouldn't be a problem with guys selling parts at cost from their garage, maybe just down the street from you!

Your contact at Zipper's (Who sent you this application?) \_\_\_\_\_

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

Shipping Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_ Web Site \_\_\_\_\_ Fax # \_\_\_\_\_

Year Business Started \_\_\_\_\_ Daily Hours \_\_\_\_\_ To \_\_\_\_\_ Closed On \_\_\_\_\_ No. of Employees \_\_\_\_\_

Type Of Business - Franchise  Brands \_\_\_\_\_ P&A Only  With Repair/Service Dept  Machine Shop Only

Parts Mgr/Buyer Name \_\_\_\_\_ Service Contact \_\_\_\_\_ Dyno? Y / N Type \_\_\_\_\_

Resale Tax Id # \_\_\_\_\_ State \_\_\_\_\_ Federal Tax ID \_\_\_\_\_

Owner's Name \_\_\_\_\_ Owners Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

**Bank Information**

BANK NAME \_\_\_\_\_ PHONE # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

BANK ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

**CURRENT SUPPLIERS AND TERMS (MOTORCYCLE INDUSTRY ONLY)**

NAME \_\_\_\_\_ CITY, ST \_\_\_\_\_ PHONE # \_\_\_\_\_

SINCE \_\_\_\_\_ TERMS CASH  CHECK  OPEN  ACCOUNT# \_\_\_\_\_ CONTACT \_\_\_\_\_

NAME \_\_\_\_\_ CITY, ST \_\_\_\_\_ PHONE # \_\_\_\_\_

SINCE \_\_\_\_\_ TERMS CASH  CHECK  OPEN  ACCOUNT# \_\_\_\_\_ CONTACT \_\_\_\_\_

NAME \_\_\_\_\_ CITY, ST \_\_\_\_\_ PHONE # \_\_\_\_\_

SINCE \_\_\_\_\_ TERMS CASH  CHECK  OPEN  ACCOUNT# \_\_\_\_\_ CONTACT \_\_\_\_\_

**ALONG WITH THIS APPLICATION, WE REQUIRE THE FOLLOWING:**

- A copy of your Business License stating the type of business you are licensed to operate
- A copy of your Yellow page ad or operator listing under motorcycles
- A photo of your Store Front and Signage, and photos of your Store interior
- A copy of a Cancelled Business Check.

**This information is required for the protection of our Legitimate Dealers.**

**This information and application must be mailed to us. DO NOT RETURN VIA FAX.**



## Sales and Tax Resale Certificate

This is to certify that all personal property and or taxable services purchased from:

### **Zipper's Cycle, Inc/Zipper's Performance Products**

Are intended for resale as tangible personal property or for use or incorporation as a material or part of other tangible personal property to be produced for sale. This certificate shall be considered a part of each order, which I/We shall hereinafter place, provided such order contains our certificate number. This is to continue in force until revoked in writing.

Certificate # \_\_\_\_\_ Date \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Phone # \_\_\_\_\_



## New Dealer Agreement

As a new dealer of Zipper's Performance Products/Zipper's Cycle, Inc., I will agree to place an initial order of \$1,200.00 upon approval of my dealer application. **Please note that Machine Shop Services do not count towards the initial order.** I agree to purchase an annual total of not less than \$2,500.00 in order to maintain my dealer status and privilege. I understand that this agreement will display my good intentions and to help protect other legitimate dealers in the motorcycle industry.

**If an order does not accompany this dealer agreement the dealer application will not be processed.**

Due to increasing administrative costs, Zipper's Performance Products/Zipper's Cycle Inc. reserves the right to terminate inactive dealer accounts upon review.

Company Name and Address

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Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Title \_\_\_\_\_



## Zipper's Performance Products Initial Order Form

Upon approval of our Dealer Application, please ship the following products:

Company Name \_\_\_\_\_

Shipping Address \_\_\_\_\_

Quantity    Part #                      Description                                      Price

Quantity	Part #	Description	Price

\*\*\*\* Machine Shop Services do not apply to the initial order.



## Preferred Payment Method

C.O.D

\_\_\_ Company check

C.O.D.

\_\_\_ Cashier/Money Order

Credit Card

\_\_\_ Credit Card

(If you would like to pay by credit card please fill out the below information)

## Credit Card Authorization Form

In order to process your credit card purchase, we must have certain information on file. Please complete this form and mail or fax it to us as soon as possible. The order will not be shipped until this information is received.

Type of Credit Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Three digit security # \_\_\_\_\_ (On the back on the credit card in the signature block you should see your credit card # and three digits at the end of your credit card #; the three digit # is \_\_\_\_\_)

Name as it appears on Credit Card \_\_\_\_\_

Billing address of Credit Card \_\_\_\_\_

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I, \_\_\_\_\_, authorize Zipper's Cycle, Inc./Zipper's Performance Product to use the above stated credit card for my purchase(s) or \_\_\_\_\_ purchase(s).

Name of Customer \_\_\_\_\_

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

\_\_\_\_\_  
Print Name

We also need a copy of your Drivers license and a copy of front and back of the credit card in order to process your order.

Please attach this form along with copy of driver's license and a copy of front and back of credit card the dealer application.

Thank you.