

DEALER APPLICATION



CUSTOM SEATS AND SEATING SOLUTIONS

1917 E. Occidental St.

PH: 1-888-443-2669

FAX: 1-888-443-5516

To Prospective Dealers:

Thank you for your interest in representing Danny Gray Products. It is our policy to offer our products at wholesale prices only to businesses that meet our minimum requirements. It is not our intent to cause you any inconvenience, but we require the following information in order to protect our existing dealers.

1. Legitimate business in the motorcycle industry
2. Have a business location separate from the owner's residence/home
3. Maintain normal business hours
4. Complete dealer application
5. Copies of:
  - a. Current local business license
  - b. Copy of resale certificate
  - c. Completed California Resale Certificate, if applicable, (enclosed)
6. All orders must be paid for in the form of **cash, cashier's check, money order or credit card must be on file**
7. Custom seat orders require a deposit at time of order

If you have any questions in regard to our requirements, please call us at 1-888-443-2669

**PLEASE COMPLETE THE FOLLOWING INFORMATION AND RETURN WITH THE ABOVE REQUIREMENTS**

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Company \_\_\_\_\_

Address \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Corp: Yes \_\_\_\_\_ No \_\_\_\_\_

Business License # \_\_\_\_\_ State Sales Tax Permit # \_\_\_\_\_

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Persons authorized to place orders \_\_\_\_\_

**Current Suppliers of Motorcycle Parts**

<u>Company</u>	<u>Phone#</u>	<u>Account#</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I HEREBY CONFIRM THAT ALL THE ABOVE INFORMATION IS CORRECT

Date \_\_\_\_\_ Signature \_\_\_\_\_ Print Name \_\_\_\_\_