



Dealer Application

COMPANY NAME: _____ DBA: _____

ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

PHONE: _____ FAX: _____

EMAIL: _____ WEBSITE: _____

FEDERAL TAX ID#: _____ RESALE # (if applicable): _____

Does your state, county, or city require a license? Yes No

If yes, print license #: _____

OWNER: _____ PARTS MANAGER: _____

OTHER AUTHORIZED PURCHASE AGENTS: _____

FRANCHISED: (CIRCLE ALL THAT APPLY)

HONDA YAMAHA KAWASAKI SUZUKI OTHER _____

Does your dealership ever sell through e-bay? YES NO If yes, please list all e-bay account names below:

Warp 9 reserves the right to decline doing business with anyone, for any reason at any time. Warp 9 reserves the right to make and change policy pertaining to Warp 9 products and its distribution. Warp 9 shall not be held liable for any monetary damages, loss of life, personal injury, or lossess of any kind should the relationship end for any reason whatsoever. All dealers understand and agree to follow Warp 9's pricing structure. Dealers are allowed to have "sales" and discount prices, but advertised prices may not go more than 5% below Warp 9's suggested retail prices. By filling out this application you are agreeing to all Warp 9 policies pertaining to Warp 9 dealers.

Please complete the following in its entirety and return to Warp 9. Included MUST be a copy of your **business** and license. You must be a licensed operation whose primary business is motorcycle, ATV, or accessory sales or service, open to the public during normal business hours.

If a check written by dealer is rejected by the bank, the dealer will be responsible for the amount of the check and a service charge of \$25.00. All payments must be made in full (including service charge) within 5 calendar days of notification if check is returned by bank. All Legal disputes will be resolved and debated in the state of Utah.

Warp 9 does not offer terms. All sales are to be made by credit card or check. If product is being shipped from Warp 9 to dealer, the payment will be charged to credit card prior to shipping unless other payment arrangements have been made through Warp 9.

Credit Card Information:

(Please print information. This card will be charged for any product ordered and shipping charges for product.)

Card Type:

VISA MASTERCARD DISCOVER AMEX (3% fee added)

Card #: _____ Exp Date: _____ CVV _____

Full Billing Address of card listed:

I agree to all terms of this dealer application and I want to become a Warp 9 dealer. I also authorize Warp 9 to charge this card when product is ordered unless other payment terms have been arranged with Warp 9.

Authorized Signature of card holder _____

Print name: _____