



DEALER APPLICATION

Credit Card COD Credit Terms Request (Complete the credit section below to apply for payment terms.)
Master Card, Visa, or American Express information is filed upon initial order

COMPANY PROFILE

Trade Name (DBA) _____ Fed Tax # _____ Resale # _____
Legal Business Name (Same) _____
Phone _____ Fax _____ Web Site _____

Billing Address

Street _____ City _____ State _____ Zip _____
Primary Contact _____ Title _____ Primary Email _____
Accounting Contact _____ Accounting Email _____
Principle/Officer Contact _____ Principle Email _____
 Sole Proprietorship Partnership LLC Corporation Year Established by Current Owner _____

Shipping Address Same as billing address?

Street _____ City _____ State _____ Zip _____

Franchise Dealer

Honda KTM Arctic Cat Sea-Doo
 Kawasaki European Can-Am Asian
 Suzuki Husqvarna Polaris Other
 Yamaha Harley Davidson _____

Markets Served

Dirt Bikes Adv. Touring
 Street Bikes Watercraft
 Custom Bikes V-Twin
 ATV / UTV Other

Vendor Reference

Vendor _____ Phone _____ Email _____
Vendor _____ Phone _____ Email _____
Vendor _____ Phone _____ Email _____

Credit Terms Applicants Only Complete This Block

Requested Credit Limit _____ Approx Annual Purchases 0-10K 11-25K 26-50K 51-100K 100K+

Company Bank Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Contact _____ Account Type _____

Account # _____

I personally and unconditionally guarantee to be individually responsible for all debts incurred by the above named company and its representatives. This guaranty is continuing and shall continue to apply to all indebtedness which may hereby incur renew or extend in whole or in part with Advantage Performance Distributing, Inc. without notice to the undersigned Guarantor. I grant security interest for all inventory proceeds sold to us by Advantage Performance Distributing, Inc. I agree to pay all balances when due pursuant to the terms sale. I further agree to pay all carrying charges for any balances that become past due at a rate of 1½% per month as well as all collection costs and attorneys fees in the event that action is commenced against the company for non-payment. Signature affirms that the above information is correct.

Printed Name of Authorized Agent _____ Title _____ Signature of Authorized Agent _____ Date _____

Home Address (required) _____ Social Security # _____



INTERNET APPLICATION

THE IP ADDRESS FOR EACH LOGIN SESSION WILL BE RECORDED TO HELP
DETER UNAUTHORIZED ACCESS.

Advantage Dealer # _____ Date _____

Dealer Name _____

PRIMARY USER (SUPERVISOR) (Supervisor receives all APD ORDER e-mail notifications for each additional user.)

First Name _____ Last Name _____

Position / Title _____ Email _____

email address must be unique from other users to receive user specific email notifications such as order confirmations and forgotten password info.

FOR APD USE ONLY:

ADDITIONAL USER INFORMATION

First Name _____ Last Name _____

Position / Title _____ Email _____

Allow user to submit online orders? YES NO

email address must be unique from other users to receive user specific email notifications such as order confirmations and forgotten password info.

FOR APD USE ONLY:

ADDITIONAL USER INFORMATION

First Name _____ Last Name _____

Position / Title _____ Email _____

Allow user to submit online orders? YES NO

email address must be unique from other users to receive user specific email notifications such as order confirmations and forgotten password info.

FOR APD USE ONLY:

ADDITIONAL USER INFORMATION

First Name _____ Last Name _____

Position / Title _____ Email _____

Allow user to submit online orders? YES NO

email address must be unique from other users to receive user specific email notifications such as order confirmations and forgotten password info.

FOR APD USE ONLY:

ADDITIONAL USER INFORMATION

First Name _____ Last Name _____

Position / Title _____ Email _____

Allow user to submit online orders? YES NO

email address must be unique from other users to receive user specific email notifications such as order confirmations and forgotten password info.

FOR APD USE ONLY:

I hereby authorize the above employees to utilize online ordering from Advantage Performance Distributing, Inc. for my company. I understand that all orders placed online will be subject to my current account terms and conditions. I understand that it is the responsibility of the Dealer to keep User Names and Passwords confidential.

Printed Name of Authorized Agent _____ Title _____ Signature of Authorized Agent _____ Date _____



RESALE APPLICATION FOR CALIFORNIA DEALERS OR DEALERS SHIPPING TO CALIFORNIA



To comply with state and local sales tax requirements, Advantage Performance Distributing, Inc. must have in its files a properly executed exemption certificate from all of its customers who claim a sales tax exemption. If we do not have this certificate, we are obliged to collect the tax for the state in which the property is delivered.

The undersigned Purchaser certifies that it is a regularly licensed retailer, registered under the laws of the state as indicated below. All parts and accessories (including motorcycle, ATV, snowmobile, and/or watercraft) and other tangible personal property purchased from Advantage Performance Distributing, Inc., are being purchased for resale in the regular course of business and are exempt from applicable state sales and use tax. Purchaser understands and agrees that if any property purchased tax-free under this certificate is used or consumed in any manner which would not exempt this sale from tax under this blanket resale certificate, the Purchaser assumes all liability to pay the proper sales/use tax, including any interest and penalty due thereon, to the proper taxing authority. This blanket certificate shall be considered a part of each order given to Advantage Performance Distributing, Inc., unless the order otherwise specifies, and shall be effective until cancelled in writing. This certificate is valid only for shipments delivered into the state of registration as identified below.

Name of Purchaser

Address of Purchaser

I HEREBY CERTIFY: That I hold valid seller's Permit No. _____, issued pursuant to the Sales and Use Tax Law; for the State of _____ and that I am engaged in the business of selling: _____ The tangible personal property described herein which I shall purchase from ADVANTAGE PERFORMANCE DISTRIBUTING, INC. will be resold by me in the form of tangible personal property; provided, however, that in the event any of such property is used for any purpose other than retention, demonstration or display while holding it for sale in the regular course of business, it is understood that I am required by Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property. Description of property to be purchased:

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Printed Name of Authorized Agent Title Signature of Authorized Agent Date

Printed Name of Authorized Agent Title Signature of Authorized Agent Date