

154 S Valencia Street/ Glendora, CA 91741 Email: justin.alloyart@gmail.com Phone: 626.963.5021 Fax: 626.335.3685 www.alloyart.com

DEALER QUALIFICATIONS

DEAR ALLOY ART APPLICANT,

WE AT ALLOY ART RELY ON A SOLID NETWORK OF APPROVED DEALERS AND DISTRIBUTORS TO ENSURE OUR SUCCESS. THE FOLLOWING REQUIREMENTS ASSURE US THAT OUR RELATIONSHIP WILL BE BENEFICIAL TO EVERYONE.

QUALIFICATIONS:

YOUR BUSINESS MUST BE ESTABLISHED IN A LEGITIMATE COMMERCIAL AREA.

YOU MUST HAVE A VALID BUSINESS LICENSE (TAX I.D. NUMBER) AND RESELLERS PERMIT. THE BUSINESS MUST BE OPEN TO THE PUBLIC FOR REGULAR BUSINESS HOURS.

PLEASE NOTE:

 ALL DEALER ACCOUNTS ARE SETUP AS COD ACCEPTING CHECK, VISA, MASTERCARD, OR DISCOVER.

• SHIPPING AND UPS COD FEES WILL BE ADDED TO YOUR INVOICE.

• ALL INTERNATIONAL ORDERS MUST BE PAID IN FULL PRIOR TO SHIPMENT BY CREDIT CARD OR WIRE TRANSFER IN "US FUNDS ONLY". INTERNATIONAL DEALERS/CUSTOMERS MUST PAY ALL ASSOCIATED COSTS- SHIPPING, DUTIES,

CUSTOMS, TAXES AND ANY OTHER COSTS.

DEALER APPLICATION MATERIALS:

A COMPLETED DEALER APPLICATION

A COPY OF YOUR VALID BUSINESS LICENSE (TAX I.D. NUMBER) AND

RESELLERS PERMIT

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Company Information

Company Name:							
Address:							
City:		State:	Zip:				
Country:		Phone:	Fax:				
Tax I.D. #		Annual Sales:					
Years In Business:		Signature:					
Number of Employees:		Email Address:					
Bikes Built Annually:		Website Address:					
	Ту	pe of Business					
Corporation LLC		Partnership	Individual Proprietorship				
	Own	er's Information					
Name:		Phone #:	Phone #:				
Address:							
City:		State:	Zip:				
Suppli	ers Yo	ou Currently Deal With					
Name:		Address:					
City:		State:	Zip:				
Account #:		Phone #:					
Name:		Address:					
City:		State:	Zip:				
Account #:		Phone #:					
Name:		Address:					
City:		State:	Zip:				
Account #:		Phone #:					



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ORDER FORM

First Name:		Last Name:			Date:		
Phone Number:							
	Shipping Address		Billing Address				
Payment Method							
VISA:			Exp. Date:		CVC:		
Master Card:			Exp. Date:		CVC:		
Shipping Method							

UPS Ground

UPS 2 Day Air

UPS 3 Day Select □

Please Note: Orders typically ship within 5 business days. Call regarding special requests. If you are not sure of what part number you need, please provide a description of the part you are looking for and someone will assist you once the form is submitted.

PART #	DESCRIPTION	QTY

To help us make sure you receive the correct part(s), please list the bike model, year, specs and any additional information that may help us determine which part you will need below.