

Signature



AIRBORNE DIK CLOBRAND VERDE & STIG WISE





Date

	1-800-332	- <b>923/</b>   21/ 500	itii Pioneer Bo	uievara,	Suite A   S	phring	boro, Onic	45000   <b>Sys</b> i	terncycie.	com		
			DE	ALER	APPLICA'	TION						
Please fill out all	of the neces	ssary information	and return thi	s dealer a	pplication to	your s	sales rep as	s soon as possik	ole.			
Terms Requestii	ng C	redit Card	COD by Cor	mpany Ch	neck	COD	by Cash					
Company Name				Compa	ıny Website							
Name			Address									
City			State				Zip Cod	le				
Phone #			Email Addr	ess								
What categories	s does your	store carry? (Pl	ease check all t	hat apply	·)							
Road Bikes Mountain Bikes Hybrid Bikes BMX Bikes Skateboards Scooters												
ears in Business Square Footage S/f Does your store sell products online? Yes No												
Bikes Sold Per Y	ear	Approx	ximate Annua	l Sales	\$			Resale Tax #				
Type of Business Sole Proprietorship Partnership Corporation LLC												
If Incorporated	orated State Bus				ess License #				Federal ID #			
If Sole Proprietorship/Partnership Applicant Social Security #												
Do you own the building your store is currently located in?  Yes  No												
If No Landlo	rd Name				Landlord	Phone	e#					
CREDIT CARD INFORMATION												
ype of Card	VISA	Mastercard	America	ın Expres	s							
Card #			ition Date	n Date CVC			C Code	Code				
Name on Card				Billing A	ddress							
Billing City				Billing	State			Billing	Zip Code			
	TERMS & CONDITIONS											
checks. Any new 2 months will b	account th e closed. All	rst year. We rese at remains inact items sold by S erminated. By sig	tive for 6 mont ystem Cycle ha	hs will be ave minin	e deleted an num advert	d you i ised pi	must start ricing; if yo	over. Any acco ou do not adhe	ount that re re to minii	emains ina mum adver	ctive for tised	

**Print Name**