



New Dealer Application

PLEASE COMPLETE AND RETURN TO DEALERS@GOFSR.COM

Business Information

Company Name

Applicant Name

Street Address

City/State

Zip

Fed Tax Id#

Company Website

Yrs. In Business

Company Phone#

Cell#

Accounts Payable Contact (Name)

Accounts Payable (Email)

Type of Ownership

Corporation

LLC

Partnership

Sole Ownership

1.Owner

2. Owner

1.Title

2. Title

Product Interest (circle all that apply)

TRAILERS

ROOFTOP TENTS

READYLIGHT

Credit References: Please include Account Numbers

Reference #1

Acct#

Phone/Email

Reference #2

Acct#

Phone/Email

Signature

Date

20495 MURRAY ROAD, SUITE 120 / BEND, OREGON 97701 / 541-306-3812 /