

Dealer Application

This interactive PDF form can be completed digitally with free adobe reader software version 6 or newer. Please remember to sign the application either digitally or by printing and signing by hand. When complete and signed, you can save the document to your computer and email it to us, or print and fax it to us.

Thank you for your interest in becoming one of our dealers. We feel that we have a lot to offer you such as:

- Products for over 700 different motorcycle models being old and new
- Over 50 different luggage options to choose from
- Over 10,000 items available
- Free shipping over \$349
- Increased order incentives based on each individual order

Our minimum dealer requirements include, but are not limited to, the following:

- A valid website and phone number
- A US commercial address that is not considered a residence
- Regular posted business hours
- More than 50% of business activity must be catered to the powersports industry

Legal Company Name		Date	
Doing Business As (DBA)			
Street Address			
City			
Store Phone Number: () Fax I	Number: ()		
Email Address			
Website Address			
Billing Address (if different)			
Description/Type of Primary Business: (select all that apply)			
Motorcylce: [] V-twin [] Metric [] ATV [] Snowmobile [] Watercraft [] Accessories			
[] Repair Shop [] Exporter [] Internet [] Other: (explain)			

Franchise Dealer For: [] Harley Davidson [] Hon	ıda [] Kawasaki [] Suzuki []Yamaha
[] BMW [] Ducati [] Sea-Doo [] Arctic Cat	[] Ski-Doo [] Polaris [] Other:
Other Brands Sold:	
1	
2	
3	
Store Hours: Monday to Friday to	Sat/Sun to
I hereby affirm that all of the above information received copies of the Advertising and Sub-Distrib	
Signature:	Date:
Print Name:	



Credit Card Blanket Authorization Form

***This authorization form is NOT required to become a dealer.

I hereby authorize Moto Machines to charge the credit card noted below for payment of fees, costs and expenses, which are incurred by myself or any member or employee of the personal business, company, partnership, LLC or Corporation stated below. I certify that I am authorized to sign this form on behalf of myself, personal business, company, partnership, LLC or Corporation. The person whose signature appears on this form is authorized to sign for the given credit card information, and is liable for the charges.

Company Name:		
Signature:	Date:_	
Telephone Number:		
[] American Express [] Maste	rCard [] Visa [] Discover	
Card No	Exp. Date	CCV Code
Name on Credit Card:		
Credit Card Billing Address:		
City:	State: Zip:	
[] KEEP ON FILE		
revoked in writing and/or the expira the company or person named above	Billing Office, and will remain in effe tion date of the card has passed. It is to complete a new Credit Card Blan enewed, or to notify Moto Machines if	s the responsibility of ket Authorization
[] ONE TIME USE ONLY		
This form will be used to complete a	single transaction and then be destr	oyed. Future

Moto Machines Phone: 703-372-7241 Moto Machines Fax: 703-940-9123

transactions will require the submission of a new form.