



526 Virginia Avenue PO Box 387 North Bend Oregon 97459

TEL: 541-756-7791 FAX: 541-756-2941

Email: sales@rpwusa.com

DEALER APPLICATION

Thank you for your interest in our products. **RPW USA** sells to dealers and distributors doing business in the motorcycle market. We do not offer open accounts. All orders may be paid for by Credit Card or COD bank check/money order.

To open a dealer account with **RPW USA** we will need the following information: Please fax complete application to (541)756-2941 or email to sales@rpwusa.com

1. Company Name: _____

2. Complete Address: _____
(Billing Address)

(Shipping Address)

(City) (State) (Zip Code)

3. Website/ Email _____

4. Phone/Fax Number: (_____) _____ (_____) _____
(Phone) (Fax)

5. Owner's Name: _____ (_____) _____
(Owner's Phone)

6. Years in Business: _____

7. **RESELLER INFORMATION:** I HEREBY CERTIFY that I hold a valid seller's permit/Tax ID No.

Resellers License # _____ Tax ID # _____

That the tangible personal property described herein which I shall purchase from **RPW USA** 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 the Sales and Use Tax Law to report and pay for the tax, measured by the purchase price of such property.

Description of property to be purchased: **Motorcycle Exhaust & Accessories**

Signature: _____ Title: _____

Date: _____ Phone: _____

8. Distributors currently purchasing from: 1. _____ Dealer # _____

2. _____ Dealer # _____

3. _____ Dealer # _____

9. Person to contact regarding your company account:

Name Address

Phone/Fax Email



DEALER APPLICATION FOR ACCOUNT WITH RPW USA.

10. Payment Option Details:

CREDIT CARD

Credit Card VISA MasterCard AMEX Discover

Credit Card Number _____ Three Digit Code _____ Exp. Date _____

Card Holders Name (as it appears on the card) _____

Billing Address: _____

City _____ State: _____ Zip: _____

COD

Certified Funds Only (Bank Check/Money Order) Yes No

All dealership applications must be accompanied by the following:

Copy of your business license with tax ID#

Copy of a resale license/certificate (not sellers permit)

- All applications are subject to approval by RPW USA. • Dealer discount applies only to dealers who have been approved and completed all appropriate documentation • Prices are subject to change at any time without notice
- We have NO minimum order • We reserves the right to refuse or revoke dealership status at any time
- Application must be completed in full.

PLEASE FILL OUT COMPLETELY, PRINT, SIGN AND FAX to (541)756-2941

I certify that to the best of my knowledge all information contained in this form is true and correct. I understand that my dealership status may be revoked if it is found that any information is incorrect.

Name of Person Completing this form

Signature

Date