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**WWW.ROOSTERCUSTOMCYCLES.COM**



**DEALER APPLICATION**

**Business Name:** \_\_\_\_\_ **Year Established:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Web Address:** www. \_\_\_\_\_

**Owner(s):** \_\_\_\_\_

**Owner(s) Home Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail (optional):** \_\_\_\_\_

**Type of Motorcycle Business:** \_\_\_\_\_

**Type of Company (Please Circle):** **LLC**    **S-Corp**    **Corporation**    **Sole Proprietorship**    **Partnership**

**Motorcycle-related References:**

1. **Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

2. **Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

3. **Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Bank:**

**Name:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Acct No:** \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Agent

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**With this completed application, please provide a copy of your State Resale Tax Certificate and Business License.**

**RoosteR Custom Cycles ships: FOB Airway Heights, WA Cashier's Check, and VISA and Master Card accepted.**

*Thanks for Choosing Perse Performance by RoosteR!*