



DirectlineUSA Distributing
1408 Summit Ave Suite #8
Plano TX 75074
Phone: 972-424-7900
Fax: 972-424-7901
www.DirectlineUSA.com

Account # _____

Submitted
 By
 Salesman _____

DEALER APPLICATION

DATE _____ BUSINESS NAME _____

DBA _____

E-Mail _____

Website _____

SHIPPING ADDRESS:

MAILING ADDRESS:

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Phone (Shop) # _____ Fax # _____ Office # _____

BUSINESS INFORMATION:

Owner(s) Name _____

Owner(s) Name _____

Home Phone # _____

Cell Phone # _____

Parts Manager _____

Business License # _____ State Tax # _____

Years in Business _____ Store Hours _____

Payment Method: Credit Card _____ C.O.D. _____ Purchase Order # Required: Yes _____ No _____

(Net 30 day terms available with approved Credit Application)
 (If Credit Card please provide Credit Card Authorization Form)

Business Type: Sole Proprietorship _____ Partnership _____ Corporation _____

Annual Aftermarket Sales: _____ New, \$0.00 - \$25,000 _____ \$25,000 - \$75,000 _____ \$75,000 - \$200,000 _____ \$200,000 plus

Business Description: Full Line _____ Repair Only _____ M/C _____ ATV _____ W/C _____ S/M _____

I hereby confirm that all requested information is correct, complete and enclosed.

Signature _____ Print Name _____

Title _____ Date _____