

PROFESSOR MOTOR INC DEALER APPLICATION



TODAY'S DATE

BUSINESS NAME

DATE ESTABLISHED

BUSINESS PHONE

BUSINESS D.B.A.

BUSINESS FAX

BUSINESS STREET

EMAIL

BUSINESS CITY

STATE

ZIP

Shipping Address

LICENSE (TAX ID)

WEB SITE

LOCATION

Mall

Warehouse

Store Front

Other

REVENUE

Internet

Resale

Mail Order

Store Sales

Business Type

Corporation

Partnership

Proprietorship

Other

NAME AND HOME ADDRESS OF BUSINESS PRINCIPALS

1. NAME

TITLE

HOME ADDRESS

2. NAME

TITLE

HOME ADDRESS

3. NAME

TITLE

HOME ADDRESS

PLEASE LIST MAJOR BUSINESS REFERENCES BELOW AND EMAIL US INSIDE & OUTSIDE PICTURES OF YOUR STORE