

Manufacturers of Cylinder Sleeves Since 1945 12051 Rivera Road

Santa Fe Springs, CA 90670 Phone: 562-945-7578 FAX: 562-698-7029

## **DEALER APPLICATION**

Thank you for your interest in our products. To qualify as a Dealer, FAX or mail <u>all</u> the following items:

- > Business license if required in your area
- Letterhead or business card
- > Yellow pages or industry publication ad
- Your company check (marked "void")
- > State Resale Tax Form (California business only)

Please provide the following information about your company:

Company r	name					
Mail addres	SS					
	# & Street			City	State	Zip
Shipping ad	ddress					
	# & Street			City	State	Zip
Phone		FAX		e-mail		
Person(s) a	authorized to ord	er				
What does	your business de	o? (Please be	specific) _			
Year Estab Franchise [	olished Dealer? □ Yes	□ No	Product Name(s)			
TYPE of BUSINESS:  ☐ Sales ☐ Service ☐ Parts ☐ Manufacturer ☐ e-mail/Web Sales		OWNERSHIP: ☐ Corporation ☐ Partnership ☐ Proprietorship ☐ Individual		PRODUCT APPLICATION  ☐ Automotive ☐ Industrial Engines ☐ Truck ☐ Compressor ☐ Other (Specify	☐ Motorcycle/ATV ☐ Personal Watercraft ☐ Snowmobile	
SURVEY: Do you do y Lathe REFEREN		ning? □ Yes □ Boring		f yes, which of the followir ☐ Porting Equipment	ng are used in yo	ur shop?
Dealer#	Company Nan	ne M	ail Address			
City	Stat	e Zip	Phone	FAX	e-mail	
Dealer#	Company Nan	ne M	ail Address			
City	Stat	e Zip	Phone	FAX	e-mail	
Dealer#	Company Nan	ne M	ail Address			
City	Stat	e Zin	Phone	FΔX	e-mail	

Place your first order any time after providing the above items and information. Your customer number will be shown on your first invoice.