

T-MAN PERFORMANCE, INC  
205 Pitts Street, Kernersville, NC 27284  
(336) 993-7068 Phone (336) 993-7082 Fax

**Dealer Application**

Legal Firm Name \_\_\_\_\_ Date \_\_\_\_\_  
Doing Business As (DBA) \_\_\_\_\_ Start of Business \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Billing Address (if different) \_\_\_\_\_  
Resale # \_\_\_\_\_ Business License # \_\_\_\_\_  
Check One: ( ) Individual ( ) Partnership ( ) Corporation (what state) \_\_\_\_\_  
Tax ID# or Social Security # \_\_\_\_\_  
Drivers License # \_\_\_\_\_ State \_\_\_\_\_

**Names of Owners, Partners, Shareholders, Officers**

<u>Name</u>	<u>Title</u>	<u>Home Address</u>	<u>Home Phone</u>
_____	_____	_____	_____
_____	_____	_____	_____

**Trade References**

Company Name \_\_\_\_\_  
Street, City, St., Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

Company Name \_\_\_\_\_  
Street, City, St., Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

Company Name \_\_\_\_\_  
Street, City, St., Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Account # \_\_\_\_\_

**Bank Information**

Bank Name \_\_\_\_\_ Account # \_\_\_\_\_  
Type of Account: ( ) Checking ( ) Saving ( ) Other  
Street, City, St., Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

**Type of Business**

( ) Franchise Dealer Dealer # \_\_\_\_\_ Please enclose copy of dealer license  
( ) Repair and Service Shop ( ) Accessory Store ( ) Used Equipment ( ) Other \_\_\_\_\_

I hereby confirm that all above information is correct.

Date \_\_\_\_\_ Signature \_\_\_\_\_

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

## Information needed to process your Dealer Application

1. Copy of Business License
2. Copy of Yellow Page Advertisement showing business under motorcycle heading. If you do not have a Yellow Page Ad, then need another form of advertising, such as a website address
3. Copy of cancelled business check
4. Picture of store front showing business sign