



Dealer Application

California dealers--- *General California Resale Certificate form BOE-230 is also required.*

Business Name: _____

Federal Tax Id: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Company Phone: _____ **Company Fax:** _____

Email Address: _____

Website: _____

Owner's Name: _____

Year business started: _____ **Sole Proprietor:** _____ **Corporation:** _____

Please list 3 manufacturers of aftermarket parts that you are currently doing business with:

1) **Company** _____ **Contact** _____
Phone _____ **Email** _____

2) **Company** _____ **Contact** _____
Phone _____ **Email** _____

3) **Company** _____ **Contact** _____
Phone _____ **Email** _____

PLEASE FAX THIS FORM TO 1-619-562-0989. CA dealers must include the general resale form.