

**PARTS DEALER APPLICATION**WE MUST RECEIVE **ALL** OF THE FOLLOWING FROM YOUR COMPANY TO QUALIFY FOR DEALER PRICING:

- A COMPLETED DEALER APPLICATION
- A PHOTOGRAPH OF YOUR BUSINESS FRONT
- A COPY OF BUSINESS OR RESALE LICENSE CERTIFICATE
- A COPY OF YOUR YELLOW PAGES AD OR BUSINESS CARD
- **MICHIGAN DEALERS** MUST SUBMIT CURRENT COPY OF TAX RESALE

**PAYMENT TERMS**BABBITT'S ONLINE **DOES NOT** OFFER OPEN TERMS

PAYMENT MUST BE MADE VIA CREDIT CARD (U.S. DEALERS ONLY), WIRE TRANSFER, COMPANY CHECK OR CASHIERS CHECK/MONEY ORDER (MADE PAYABLE TO BABBITT'S ONLINE)

BUSINESS TRADE NAME (DBA) \_\_\_\_\_

BUSINESS LEGAL NAME (AS IT APPEARS ON BUSINESS LOCATION) \_\_\_\_\_

BUSINESS STREET ADDRESS (STREET, CITY, ST AND ZIP CODE) \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

SHIPPING ADDRESS (IF DIFFERENT-STREET, CITY, ST AND ZIP CODE) \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

WEBSITE ADDRESS \_\_\_\_\_

OFFICER | OWNER NAME \_\_\_\_\_

TITLE \_\_\_\_\_

DEALER CONTACT (PURCHASER) \_\_\_\_\_

TITLE \_\_\_\_\_

**DESCRIPTION OF BUSINESS**

TYPE OF BUSINESS (CHECK ONE)

SOLE PROPRIETORSHIP PARTNERSHIP CORPORATION ARE YOU A FRANCHISED DEALER FOR A MAJOR MANUFACTURER?  YES  NO

IF YES, WHICH MANUFACTURER(S):

 ARCTIC CAT  HONDA  KAWASAKI  KTM  POLARIS  SUZUKI  YAMAHA

INCORPORATED IN THE STATE OF: \_\_\_\_\_ LENGTH OF TIME OPERATING UNDER THE ABOVE NAME: \_\_\_\_\_

LENGTH OF TIME AT THE ABOVE ADDRESS: \_\_\_\_\_ NUMBER OF BRANCHES/OUTLETS OPERATED/MANAGED BY YOU: \_\_\_\_\_



2 PAGES



**ARCTIC CAT****HONDA****Kawasaki****KTM****POLARIS****SUZUKI****YAMAHA****BABBITT'S****INDUSTRY PREFERENCES**

E.G.: SUPPLIERS IN THE UNITED STATES THAT ARE ACTIVELY DISTRIBUTING RELATED INDUSTRY PARTS TO YOUR BUSINESS THAT YOU HAVE PURCHASED FROM THE PAST 12 MONTHS

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_

ADDRESS \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_

ADDRESS \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

**CREDIT CARD PAYMENT INFORMATION (U.S. DEALERS ONLY)**

NAME ON CREDIT CARD: \_\_\_\_\_

CREDIT CARD #: \_\_\_\_\_ EXPIRATION DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ CVV# \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX#: \_\_\_\_\_

This application is submitted by applicant to Babbitt's Sports Center (babbittsonline.com) for the purpose of obtaining dealership status. Babbitt's reserves the right to decline dealership status to applicant and, in the event the dealership status is approved, to change or revoke applicant's dealership status on the basis of changes in dealership policies or applicant's financial condition and/or payment record. All sales of products and services by BABBITT'S to applicants will be subject to Babbitt's standard sales terms and conditions as stated on babbittsonline.com in effect at the time of the order. And variance from those terms and conditions will be effective only if agreed to in writing by Babbitt's prior to the time the product or services are ordered. By signing this application, applicant certifies that all information provided on this application is correct to the best of applicant's knowledge. Applicant hereby authorizes the release of credit and banking information to Babbitt's by the references listed on this application. After 12 mo. Inactivity applicant must re-apply for dealer status.

SIGNED AT: \_\_\_\_\_ AS OF THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20 \_\_\_\_\_

OFFICER/OWNER: \_\_\_\_\_ AUTHORIZED SIGNATURE \_\_\_\_\_ PRINTED NAME \_\_\_\_\_



**E-MAIL APPLICATION TO:** JAMES@BABBITTONLINE.COM -OR- **FAX:** (231) 733-9617 -OR- **CALL:** (231) 220-2140  
 -OR- **MAIL:** BABBITTONLINE | ATTN: JAMES | 3712 AIRLINE RD. | MUSKEGON, MI 49444