



# DEALER APPLICATION

PLEASE FILL OUT ENTIRELY ALONG WITH YOUR RESALE TAX CERTIFICATION AND PICTURES OF YOUR FACILITY.

## PERSONAL INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## BUSINESS INFORMATION

Business Name: \_\_\_\_\_ Website Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

State Sales Tax Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Type of Facility: Retail: \_\_\_\_\_ Storefront: \_\_\_\_\_ Industrial: \_\_\_\_\_ Other: \_\_\_\_\_

Year Established: \_\_\_\_\_ Do you offer or plan to offer a catalog? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Nearest Major City: \_\_\_\_\_ Distance from your location in miles: \_\_\_\_\_

Is karting your primary business? Yes: \_\_\_\_\_ No: \_\_\_\_\_ I no, what is? \_\_\_\_\_

Do you sell by: Retail: \_\_\_\_\_ Mail Order: \_\_\_\_\_ Track: \_\_\_\_\_ Dealers: \_\_\_\_\_ On-Line: \_\_\_\_\_ Other: \_\_\_\_\_

Form of organization: Corporation: \_\_\_\_\_ Partnership: \_\_\_\_\_ Sole Proprietorship: \_\_\_\_\_ Other: \_\_\_\_\_

Do you race karts yourself? Yes: \_\_\_\_\_ No: \_\_\_\_\_ Do any of your employees race karts? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Closest karting facility: City: \_\_\_\_\_ State: \_\_\_\_\_ Track Name: \_\_\_\_\_

Type of racing done there: 2-cycle: \_\_\_\_\_ 4-cycle: \_\_\_\_\_ Sprint: \_\_\_\_\_ Oval: \_\_\_\_\_ Pavement: \_\_\_\_\_ Dirt: \_\_\_\_\_

## TRADE REFERENCES

Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FINANCIAL INFORMATION

Bank Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Bank Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Commercial Account: Yes: \_\_\_\_\_ No: \_\_\_\_\_

By signing below, applicant agrees to the following:

- To authorize Hoosier Kartsport to investigate applicants credit record
- To authorize references listed above to provide Hoosier Kartsport with all relevant information
- All dealer terms as stated on the Dealer Terms and Conditions document

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_