



P.O. Box 113, Cass City, MI 48728 • www.marshalldistributing.com • Ph. (989) 872-2109 • Fx. (989) 872-5350

Dealer/Credit Application

Date \_\_\_\_\_  New Application  Update: Dealer # \_\_\_\_\_

Company Name \_\_\_\_\_

DBA (if different) \_\_\_\_\_

Bill to Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Ship to Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

E-mail \_\_\_\_\_ Web Site \_\_\_\_\_

Date Business established \_\_\_\_\_ Number of Employees \_\_\_\_\_

Store Hours \_\_\_\_\_

Owner/s \_\_\_\_\_ Home Ph \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Parts Manager \_\_\_\_\_ Accounting Contact \_\_\_\_\_

Company Bank \_\_\_\_\_ Ph ( ) \_\_\_\_\_ Contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Mark One Sales tax # \_\_\_\_\_

- Corporation or LLC State of Incorporation \_\_\_\_\_
- Partnership/Sole Proprietorship

Authorized purchasers \_\_\_\_\_

Trade Suppliers

Company Name \_\_\_\_\_ Ph ( ) \_\_\_\_\_

Company Name \_\_\_\_\_ Ph ( ) \_\_\_\_\_

Are you a franchised Dealer?

- Yes, please list. (Documentation not necessary.)

- No, please submit following **required** documentation:
  - \_\_\_\_\_ 1. Your **completed** dealer application.
  - \_\_\_\_\_ 2. A copy of your state tax resale certificate.
  - \_\_\_\_\_ 3. A copy of business license.
  - \_\_\_\_\_ 4. A copy of your business check.
  - \_\_\_\_\_ 5. A copy of your Yellow Pages ad, or business listing with directory assistance.
  - \_\_\_\_\_ 6. Photos of business: Customer area, shop area, street view of building with sign.  
(Mail or e-mail photos to [newdealer@marshalldistributing.com](mailto:newdealer@marshalldistributing.com). No faxed photos.)

Payment Type

- C.O.D
- Credit Card (Visa, MasterCard and Discover)
- OPEN (If applying for OPEN account, please continue to page 2 & 3)

<b>Office Use Only</b>	
<b>REC</b>	_____
<b>TYPE</b>	_____
<b>ZN</b>	_____
<b>LOC</b>	_____
<b>SLS</b>	_____
<b>ST</b>	_____
<b>CATS</b>	_____
<b>OPEN</b>	_____
<b>PSWRD</b>	_____

**If applying for open account please complete the following section, if not, go to the last section**

**Owner(s)/Officers**

\_\_\_\_\_  
Name Title SSN (required): \_\_\_\_\_

\_\_\_\_\_  
Home Address Home Phone: ( ) \_\_\_\_\_

\_\_\_\_\_  
Name Title SSN (required): \_\_\_\_\_

\_\_\_\_\_  
Home Address Home Phone: ( ) \_\_\_\_\_

\_\_\_\_\_  
Name Title SSN (required): \_\_\_\_\_

\_\_\_\_\_  
Home Address Home Phone: ( ) \_\_\_\_\_

**Name of Bank**/Checking: \_\_\_\_\_ Branch \_\_\_\_\_

Phone/Fax No. ( ) \_\_\_\_\_ Account No: \_\_\_\_\_

**Name of Bank**/Financing (if different): \_\_\_\_\_ Branch \_\_\_\_\_

Phone/Fax No. ( ) \_\_\_\_\_ Account No: \_\_\_\_\_

**Aftermarket References: If you are using Parts Unlimited, Drag Specialties, Custom Chrome, Motorcycle Stuff, or Kimpex as a trade reference, please send copies of your most recent statements, as they are not responding to our credit inquiries.**

1.) \_\_\_\_\_ Acct#: \_\_\_\_\_ Phone/Fax No:( ) \_\_\_\_\_  
Name

2.) \_\_\_\_\_ Acct#: \_\_\_\_\_ Phone/Fax No:( ) \_\_\_\_\_  
Name

3.) \_\_\_\_\_ Acct#: \_\_\_\_\_ Phone/Fax No:( ) \_\_\_\_\_  
Name

4.) \_\_\_\_\_ Acct# \_\_\_\_\_ Phone/Fax No:( ) \_\_\_\_\_  
Name

5.) \_\_\_\_\_ Acct# \_\_\_\_\_ Phone/Fax No:( ) \_\_\_\_\_  
Name

**Franchises** (Name/Acct no.): \_\_\_\_\_

I/we authorize **Marshall Distributing** to contact the references listed above pertaining to my/our credit and financial responsibility and to obtain a personal credit report on all owners/officers.

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

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

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

## Personal Guaranty

To induce **Marshall Distributing, Inc.** to offer a line of credit to the above company, hereafter referred to as the company, the undersigned (whether one or more) guaranty to **Marshall Distributing, Inc.** that the company's account will be paid when due. This guaranty covers both present and future liabilities. This guaranty will remain in effect as long as we own the company and will cover any credit extended up to that date. If we terminate this guaranty, we will still be liable for any of the company's balance on account at the time such notice becomes effective.

\_\_\_\_\_ Date: \_\_\_\_\_  
Print Name

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

\_\_\_\_\_ Date: \_\_\_\_\_  
Print Name

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

\_\_\_\_\_ Date: \_\_\_\_\_  
Print Name/Witness

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

- 
1. **TERMS:** C.O.D., Open Account, and Credit Card (Visa, MasterCard, Discover). Orders are shipped C.O.D. or credit card unless an account has been approved for credit. Open account order terms are 10<sup>th</sup> prox. C.O. D. accounts are preferred. A finance charge of 1-1/2% per month (annual rate of 18%) will be assessed on all accounts over 30 days. **All past due accounts will be placed on C.O.D. until the account is brought up to date.**
  2. **RETURNED CHECKS:** There will be a \$30.00 service charge on any returned checks, and the account will be placed on a "Money Order Only" basis. If the account is not paid within 10 days, it will turned over to our lawyers for collection.
  3. **TOLL FREE ORDERING:** Orders may be called or faxed to our toll free numbers (Orders received by 5:00 PM EST will usually ship that day) by Phone to **800-248-0136** or by Fax to **800-728-7999**. After-hour calls are answered by an automatic answering system. Any calls or faxes received after-hours will be processed the next business day.
  4. **ON-LINE ORDERING:** On-line ordering is available. **AFTER YOU HAVE BEEN APPROVED**, you may contact us to apply for a password.
  5. **SHIPPING ALLOWANCE:** Shipping is prepaid in the lower 48 states for Ultra Dealers according to the program and for non-Ultra Dealers over \$300. (Ultra Dealer program detailed on our policy page in the back of our catalogs)
  6. **MINIMUM ORDER:** There is a \$50 minimum order requirement; orders under \$50 will be charged a \$6.00 handling charge.

I/We hereby certify that the above information is true to the best of my knowledge. I also understand that **Marshall Distributing, Inc.** reserves the right to deny this application.

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