

NEW DEALER APPLICATION

Dear Prospective Customer;

We are always happy to accept new dealer applications from qualified retailers and would like to thank you in advance for your interest. To establish an account with us you need to be an industry related manufacturer or have a retail storefront selling bicycles and related accessories. If you are a Choppers U.S. Dealer already, there is no need to complete an additional application.

Please complete all information listed below. Providing incomplete information may slow down your application. All information will be held in the strictest confidence. And we won't sell or release your information to anyone without your prior written consent.

Please note that we also require faxed or mailed copies of the following documents to complete our account review:

1. Copy of your state sales tax certificate or resale certificate.
2. Copy of business license for sale or repair of bicycles.
3. Copy of occupational license for sale or repair of bicycles.
4. Copy of proof of liability insurance for your business
5. Completed and signed application. We will also need the signatures of all owners of the business in appropriately marked spaces.

CYCLES U.S., LLC
 Attention: *New Dealer Accounts*
 7950 Cherry Ave., Unit 108, Fontana, CA 92336
 Phone: 909-355-3065
 Fax: 909-355-3058
 Toll Free: 1-866-946-5888
 www.choppersus.com www.cyclesus.com

You can either fax (909-355-3058) or mail your application and the above materials to us.

We will set up payment terms based upon the form of credit requested, as well as a review of your bank and credit information/references.

PLEASE PRINT ALL INFORMATION - INCOMPLETE INFORMATION WILL DELAY YOUR APPLICATION

Store Name			
Federal ID/Business License #		Resale Certificate #	
Billing Address:			
Street			
City	State	Zip/Postal Code	Country
Phone ()	Fax ()		
Web Address			
Billing Contact Name		Email	
Shipping Address (<input type="checkbox"/> Check if Same as Above)			
Street (No P.O. Boxes Please)			
City	State	Zip/Postal Code	Country
Phone ()	Fax ()		
Primary Contact Name		Email	
Type of Company: (Check One) <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation			
Type of Account Desired: <input type="checkbox"/> C.O.D Certified Check <input type="checkbox"/> C.O.D. Company Check <input type="checkbox"/> Credit Card			
<input type="checkbox"/> Open Account - Requested Credit Limit: \$_____ <input type="checkbox"/> Prepay <input type="checkbox"/> Wire Transfer			
Tell Us About Your Store: How Long Have You Been in Business?			
Size of Store: _____ sq. feet	# of Locations: (Check One) <input type="checkbox"/> 1 <input type="checkbox"/> 2-4 <input type="checkbox"/> 5-10 <input type="checkbox"/> Over 10		
What style of bicycles are your most popular?			
Major Product Lines Carried for Complete Bicycles:			

Owner(s) Information:

OWNER #1:

Name Position/Title

Home Address Home Phone ()

Driver's License # State S.S. #

OWNER #2:

Name Position/Title

Home Address Home Phone ()

Driver's License # State S.S. #

Trade References: (Please Provide at Least 3 Trade References with Whom You Have Established a Business Relationship)

Company Account # Address Phone Contact

1)

2)

3)

Banking Information:

Bank Name Type of Account Account #

Address Phone () Contact

Liability Insurance Policy: Carrier Policy Number

By signing below, you represent that the above information is true and correct.

You also agree to the following Cycles U.S. Terms and Conditions:

Sales Policy: Cycles U.S. sells is happy to offer a courtesy discount to wholesale accounts. Proper identification of a retail store establishment is necessary for purchasing. California State Customers must have a valid seller's permit from the State Board of Equalization.

Terms: Terms are C.O.D. Cash or Credit Card until you have obtained an open account. To obtain an open account, the credit information above must be filled out in its entirety and then be approved by our credit department. A service charge will be applied to all past due accounts. Returned check fee is \$25.

Shipping: All orders will be shipped by either U.P.S. ground or U.S.P.S. priority mail at our discretion, unless special instructions are provided.

Returned Shipments: When sending back shipments, return freight charges are the customer's responsibility and non-reimbursable. No merchandise returned after 15 days will be accepted unless goods are defective or shipped in error. All returns are subject to an inspection upon return to the warehouse. In case of defective merchandise we reserve the right to credit or replace that item at our discretion. Returns are subject to a restocking charge of 15%.

Damaged Goods: Products damaged in transit must be reported to the carrier. You are advised to save all packing lists, shipping cartons, and packing material until you have contacted the carrier. We will do everything possible to speed the process to get you a replacement or credit.

Shortages: All credits and claims for shortages must be reported to the office within 24 hours. Before calling, make sure you open and thoroughly inspect all cartons and packing materials and tell us how many cartons you received. Also, please make sure you count the amount of packages you receive before you sign for them.

Ordering: Please provide your Cycles U.S. account number and part numbers when placing orders. This will minimize errors and speed up the ordering process. Due to privacy concerns, we can not drop ship directly to your customers. Minimum order is \$50.00 US - orders placed below this amount are subject to a \$5.00 administrative fee.

Notes: All prices and descriptions contained on all Cycles U.S. marketing materials are subject to change without prior notice. All prices F.O.B. Upland, California. Items can be withdrawn from sales at anytime. We are not responsible for typographical errors.

I/We authorize specified trade, bank and credit references to release any credit information on our firm to Cycles U.S. as needed to process this application. In addition, I/we also authorize Cycles U.S. to inquire about our business with credit reporting agencies.

Authorized Signature Title Date

Furthermore, by signing above, once an account is established, all owner(s) agree to personally guarantee payment for any/all outstanding payables from the applicant due to Cycles U.S.

Sales Rep. Credit Limit Terms Account # Assigned Reviewed By Date Received