

Dealer Application

1. # of Installation Service Bays _____

2. # of Inside salespeople _____

3. # of Outside salespeople _____

4. Truck Equipment lines you currently sell

5. Estimated # of beds you would sell per month _____

6. Years in Business _____

Geographical area you cover _____

7. Business Name _____

Address _____

City _____ State _____ Zip _____

Toll free # _____ Phone # _____

Fax # _____ Webpage _____

Owners _____

Purchasing _____ Accounting _____