



MOTORCYCLE TIRE COMPANY

DEALER APPLICATION

| | | |
|-------------------------------------|---------------------|---|
| Type of Account you are requesting: | OPEN | COD |
| CREDIT CARD # | _____ | EXP. _____ V-Code _____ |
| Business Information | | |
| Full Business Name: | | |
| Business Structure: | Sole Proprietorship | Partnership Corporation LLC Other _____ |
| Billing Address | City | State Zip |
| Shipping Address | City | State Zip |
| Telephone () | | Fax () |
| E-mail: | | |
| Years in Business: | | |
| Name of Principal Owner and Title: | | |
| Accounts Payable Contact: | | Parts Manager: |
| Federal Identification #: | | State Sales Tax #: |

Please type or print legibly.

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|--|--|
| Bank Reference | |
| Bank Name: | Account Number: |
| Address: | Phone: |
| Contact Person: | Fax: |
| Trade (Credit) References | |
| Name: Address: City, State, Zip: | Phone: Fax (Required): ACCOUNT # |
| Name: Address: City, State, Zip: | Phone: Fax (Required): ACCOUNT # |
| Name: Address: City, State, Zip: | Phone: Fax (Required): ACCOUNT # |

MOTORCYCLE TIRE COMPANY
975 John A. Papalas Dr. • Lincoln Park • MI 48146
Phone: (800) 288-4682 • Fax (734) 513-0213
www.mtctires.com sales@mtctires.com



Terms of Application / Acceptance

OPEN ACCOUNTS: All open accounts are set up on *Net 10th of Next Month* terms. This means all invoices are due and payable on or before the 10th of the month following the transaction(s). For example: All invoices from January are due February 10th. Special terms may apply to certain specials and promotions by Motorcycle Tire Company. Any such terms will be identified on each invoice under "Terms."

COD: All COD transactions are subject to a \$13.00 per transaction fee. All COD Accounts will be set up Cashiers Check or Money Order only until bank and trade references have been checked.

FINANCE CHARGES: Service charges will accrue at the end of each month at a rate of 2.00% per month (24% per annum) on all balances past due, with \$2.00 minimum per month. If such charges are posted to our account, I/We agree to pay such charges.

RETURNED CHECKS/NSF CHARGES: All returned checks will incur a \$39.00 charge which will be automatically posted to your account. If such charges are posted to our account, I/We agree to pay such charges.

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|--|------------------------|--------------|
| <u>PERSONAL GUARANTEE</u> | | |
| In order to induce MOTORCYCLE TIRE COMPANY, to extend credit to the foregoing applicant, the undersigned individual(s) who are the majority owner(s) of the applicant do hereby guarantee the prompt payment by the applicant of it's obligation to MOTORCYCLE TIRE COMPANY, INC | | |
| Signature of Owner Or Principal Officer: | Drivers License# _____ | Date: _____ |
| Print Name: | SSN: _____ | Title: _____ |
| Signature of Owner Or Principal Officer: | Drivers License# _____ | Date: _____ |
| Print Name: | SSN: _____ | Title: _____ |

AUTHORIZATION TO RELEASE INFORMATION: I/We hereby authorize our bank/suppliers to release any information necessary to assist us in establishing an account with Motorcycle Tire Company, Inc

Signature* Title Date

* I certify that the information furnished above is true and correct to every material matter.

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