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www.tigertail.us

TigerTail Tow System Authorized Dealer Application

Company Name: _____

Fed Tax ID#: _____ State Tax ID#: _____ Resellers ID#: _____
 Corporation Partnership Subsidiary or Branch-office Sole Proprietorship

Year Established: _____ Estimated Annual Sales: _____

Brands Sold: _____

Mailing and Billing Address Is this the main dealership address? Yes No

Address 1: _____

Address 2: _____

City: _____ State/ Province: _____ Zip: _____ Country: _____

Shipping Address Same as billing? Yes No Main address? Yes No

Address 1: _____

Address 2: _____

City: _____ State/ Province: _____ Zip: _____ Country: _____

Primary Contact(s): _____ **Primary Phone:** _____

Primary Email: _____ **Website:** _____

AUTHORIZATION, INVESTIGATION, & RELEASE OF INFORMATION

I authorize investigation of all statements contained in this profile. I understand that misrepresentation or omission of facts called for is cause for non-consideration of a Dealership Account.

Signature: _____ **Date:** _____