

Atair Aerodynamics - Dealer Application

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Applications for dealerships are always welcome. However, at this time we do not grant dealerships to individuals. If you are an individual interested in establishing a dealership, please fax the completed application form and we will contact you if this policy changes.

Dealer Name: _____

Address: _____
(street)

_____ (city, state or country) _____ (zip code)

Phone: _____ **Fax:** _____

Email: _____ **Web Address:** _____

Home Dropzone Information: (if more than one, please list)

DZ Name: _____

DZ Address: _____
(street)

_____ (city, state or country) _____ (zip code)

DZ Name: _____

DZ Address: _____
(street)

_____ (city, state or country) _____ (zip code)

Sales Territory: _____

Other Companies You Have Dealerships For: _____

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Dealer Name (again): _____

References (bank and two trade):

1) Bank Name: _____

Company Name on Account: _____

Bank Address: _____

(street)

(city, state or country)

(zip code)

Phone: _____

Contact: _____

Acct#: _____

EIN#: _____

2) Company Name: _____

Address: _____

(street)

(city, state or country)

(zip code)

Phone: _____

Contact: _____

3) Company Name: _____

Address: _____

(street)

(city, state or country)

(zip code)

Phone: _____

Contact: _____

PRINT AND FAX FORM TO 718-923-1733