



416 CROWN POINT CR
 GRASS VALLEY, CA 95945
 (530)272-9036 / FAX (530)272-4306

2007 DISTRIBUTOR APPLICATION DATE _____

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BUSINESS NAME _____
(PLEASE PRINT CLEARLY)

PHONE _____ **FAX** _____

BILLING ADDRESS _____

SHIPPING ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

YEARS IN BUSINESS _____ **CONTACT PERSONS NAME** _____

NOTE: IF A CALIFORNIA DISTRIBUTOR, PLEASE SEND A COPY OF YOUR RESALE CARD.

PLEASE LIST THREE MOTORCYCLE INDUSTRY REFERENCES:

NAME _____ **PHONE** _____

ADDRESS _____

CITY, STATE & ZIP _____

NAME _____ **PHONE** _____

ADDRESS _____

CITY, STATE & ZIP _____

NAME _____ **PHONE** _____

ADDRESS _____

CITY, STATE & ZIP _____

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ADDITIONAL INFORMATION REQUIRED:

- NUMBER OF SALESPERSONS YOU HAVE IN THE FIELD _____
- NUMBER OF CATALOGS YOU MAIL EACH YEAR _____
- GENERAL GEOGRAPHICAL AREA COVERED _____

PLEASE SEND US THE FOLLOWING:

- A PHOTO COPY OF YOUR FIRMS YELLOW PAGE LISTING.
- A PHOTO COPY OF YOUR RESALE/BUSINESS LICENSE (REQUIRED INFORMATION FOR CALIFORNIA CUSTOMERS)
- A SAMPLE OF YOUR LETTER HEAD AND BUSINESS CARD.
- A COPY OF YOUR CATALOG OR WEBSITE ADDRESS _____

TERMS:

- **MINIMUM INITIAL ORDER IS \$1000.00**
- DISTRIBUTOR SALES REQUIREMENT IS \$1000.00 QUARTERLY/\$4000.00 ANNUALLY.
- \$400.00 MINIMUM PER ORDER, IF UNDER SUBJECT TO A \$20.00 HANDLING CHARGE.
- 5% DISCOUNT GIVEN FOR ORDERS EXCEEDING \$7500.00
- CREDIT CARD PAYMENTS ARE SUJECT TO A 3% CONVIENCE FEE.
- WE CHARGE CURRENT UPS RATES INCLUDING INSURANCE.
- OPEN ACCOUNT (NET 30) APPLICATION FAXED UPON REQUEST.
- DROP SHIPMENT INFORMATION FAXED UPON REQUEST.

SHIPPING INFORMATION:

- WE CAN SHIP UPS OR BEST TRUCK RATE AVAILABLE. ALL TRUCK FREIGHT CHARGES ARE FREIGHT COLLECT.
- IF YOU HAVE A PREFERRED TRUCK COMPANY, PLEASE SPECIFY: _____

EMAIL ADDRESSES:

INFORMATION: _____

BOOKKEEPING: _____

DO YOU HAVE OUR CURRENT CATALOG AND PRICE LIST/ OR NEED EXTRA COPIES SENT? _____

THANK YOU FOR YOUR INTEREST IN MAIER PLASTICS.

PLEASE VISIT OUR WEBSITE AT: www.maier-mfg.com

New Accounts Department