

PLEASE FILL OUT AND RETURN TO ACHIEVE ACCOUNT STATUS

PLEASE ATTACH BOTH OF THE FOLLOWING:

- COPY OF STATE RESALE LICENSE (ATTACH COPY)
- COPY OF THE STATE MOTOR VEHICLE SELLERS REGISTRATION LICENSE OR BUSINESS LICENSE
- FOR CALIFORNIA SIGNED RESALE CERTIFICATE, OR SALES TAX WILL BE CHARGED

AND PLEASE ATTACH ON OF THE FOLLOWING:

- COPY OF ADVERTISEMENT
- COPY OF YELLOWPAGE AD
- STOREFRONT PHOTO

- TYPE OF BUSINESS:**
- DEALER/RETAILER
 - SERVICE/REPAIR
 - DISTRIBUTOR
 - PARTS/ACCESSORIES
 - IMPORTER/EXPORTER
 - MANUFACTURER
- MARKET CATEGORIES:**
(CHECK ALL THAT APPLY)
- ATV
 - DRAG
 - PERFORMANCE
 - TOURING
 - AMERICAN BIG TWIN
 - DUAL SPORT
 - SCOOTER
 - VINTAGE
 - CRUISER
 - EXTREME
 - SNOWMOBILE
 - WATERCRAFT
 - DIRT BIKES
 - KARTING
 - STREET BIKES
- FRANCHISES:**
- BMW
 - HARLEY-DAVIDSON
 - NORTON
 - BSA
 - HONDA
 - SUZUKI
 - BUELL
 - KAWASAKI
 - TRIUMPH
 - DUCATI
 - KTM
 - YAMAHA
 - OTHER _____

BUSINESS NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ **FAX NUMBER:** _____

E-MAIL: _____

COMPANY BANK: _____

ADDRESS: _____

PHONE NUMBER: _____ **BANK OFFICIAL (IF KNOWN):** _____

OWNER'S NAME: _____

BUYER'S NAME: _____

YEARS IN BUSINESS: _____ **NUMBER OF EMPLOYEES:** _____ **GROSS SALES:** _____

WHEN APPROVED AS ONE OF SUDCO CUSTOMERS, INITIAL ORDERS ARE SENT C.O.D./CASH ONLY UNLESS PRIOR ARRANGEMENTS HAVE BEEN MADE. UPON RECEIPT OF YOUR BANK REFERENCE, FUTURE ORDERS WILL BE SENT C.O.D., COMPANY CHECK ACCEPTABLE. SIGN BELOW IF YOU AGREE TO THE CONDITIONS OF OUR TERMS.

Signature: _____ **Title:** _____ **Date:** _____

COMPLETE FORM AND RETURN TO:
SUDCO INTERNATIONAL CORPORATION, 2410 S. SEQUOIA DRIVE, COMPTON, CA 90220
TEL: 310-637-8330 FAX: 310-637-8331

