Dealer Application (Please Print)

Dealership

Name:	Phone:
(must match name on dealer license)	
Mailing Address:	Fax:e)
Phys Address:	Home Ph:
City:	State: Zip:
E-mail Address:	
State Tax #	Dealer License #
Yrs. In Business: () Proprie	etorship()Partnership()Corporation
Line of Business:	
Owner/Principals	
Name:	Phone:
Title:	SSN:
Name:	Phone:
Title:	
Name:	
Title:	SSN:

Information About Your Firm

General Mgr:	Sales	Mgr:		
# Of Salespeople: Full Time Par	t Time Do Yo	ou Have: ()Showroom ()	Parts Store
Size of Lot:()Fe	nced ()Lighted ()Paved	# Of Yrs @	Location
Sevice Mgr:	Parts	Mgr:		
Accts Payable Mgr::		# Of Se	ervice People:	
How many trailers do you stock?	How ma	any Valley Tr	ailers will you sto	ock?
Credit Information				
Inventory Financing: () C.O.D. () I	Floor Planning			
Banking References				
Bank Name:	Contac	ot:		
Address:	City:	¥	State:	Zip:
Phone:Fa	ax:	C	Credit Line: \$	
Flooring				
Flooring Source:		Contact:		
Address:	City:		State:	Zip:
Phone:Fa	X:	(Credit Line: \$	
Trade References (Trailer Manu	facturers)			
Name:		Pho	one:	
Contact:				
Address:	City		State:	Zip:

Name:	Phone:		
Contact:	Fax:		
Address:	City:	State:_	Zip:
Trade Refrences (other than Tr	ailer Manufacturer	rs)	
Name:	Phone:		
Contact:		_ Fax:	
Address:	City:	State:	Zip:
Name:	F	Phone:	
Contact:		_ Fax:	
Address:	City:	State:	Zip:
Name:	P	hone:	
Contact:	Fax:		
Address:	City:	State:	Zip:
Other Lines Carried			
Manufacturer	Time Dealing With	# In Inventory	Dropping Line?
Please provide us with the follo	owing		
• A Picture of Your Location • Copy of	f Dealer License • 0	Copy of Resale Permi	t
Signature		Date	



Credit Inquiry Authorization

I authorize Valley Trailers to check our bank references, personal credit, and credit with the trade references named on pages 2 and 3 of this application.

Company Name:		
Company Officer's Signature:		
Company Officer's Signature		
Name (please print)	Date:	



In an effort to keep the cost of our products down Valley Trailers must ask that each of our dealer friends help us with the following common problems. In return, Valley Trailers agrees to make every effort to maintain a superior quality product. with a responsive attitude to dealer input.

Only as a team can we continue to supply a high quality product at the lowest possible price. Please read the following agreement carefully and return it to the Valley Trailers business office with your company officer signature. Thank you in advance for your cooperation

- A. I agree to pick up or pay for all products ordered, completed, and ready for shipment within 10 days of notification.
- B. I agree to collect and send to Valley Trailers business office a minimum of 25% on any trailer that requires a partial payment on any custom built product.
- C. I agree to pay all expenses involved in collecting an insufficient check on my account.
- D. I agree to fax all products ordered (including colors) to the Valley Trailers business office.
- E. I agree no product may be canceled after being on order for 7 working days.
- F. I agree no product ordered may be changed after the work order is processed to the plant (usually about 10 working days). Changes are subject to a fee depending on the nature of the change. All changes need to be faxed, with the changes noted and the color information indicated.
- G. I agree to supply and fully explain the Valley Trailers product warranty to each retail purchaser.

Any dealer failing to comply with paragraphs A, B, C, & E, or if this agreement isn't signed and on file at Valley Trailers business office dealers will be required to remit a 25% partial payment on all orders when placed.

	Company Name	
Company Officer's Signature	Title	Date
Print Name	Title	Date