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## SNOW WEST DEALER APPLICATION

CUSTOMER NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov / State \_\_\_\_\_ Postal / Zip: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ FAX NUMBER: (\_\_\_\_\_) \_\_\_\_\_

GST No# \_\_\_\_\_ PST# \_\_\_\_\_

Business License Number \_\_\_\_\_

Snowmobile: Arctic Cat \_\_\_\_\_ Polaris \_\_\_\_\_ Ski Doo \_\_\_\_\_ Yamaha \_\_\_\_\_ Other \_\_\_\_\_ (please specify)

ATV/Motorcycle: Honda \_\_\_\_\_ Kawasaki \_\_\_\_\_ KTM \_\_\_\_\_ Polaris \_\_\_\_\_ Suzuki \_\_\_\_\_ Yamaha \_\_\_\_\_ Other \_\_\_\_\_

Chev/GM \_\_\_\_\_ Dodge \_\_\_\_\_ Ford \_\_\_\_\_ Other \_\_\_\_\_

Parts Manager \_\_\_\_\_ P.O's Required? \_\_\_\_\_

Related Trade references: 1) \_\_\_\_\_ 2) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

VISA CARD NUMBER: \_\_\_\_\_ EXPIRY DATE \_\_\_\_\_

MASTERCARD NUMBER \_\_\_\_\_ EXPIRY DATE \_\_\_\_\_

I/WE THE UNDERSIGNED, CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

\_\_\_\_\_, authorize Snow West Distributing Inc to debit My/Our credit  
(Print Name of Cardholder)  
card for the total amount of merchandise shipped plus applicable taxes and freight.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
(Card Holder signature only)

**Please Note: Snow West Distributing Inc. will not set up any dealer accounts without a Visa/Mastercard signed by the authorized card holder.**

