



ULTIMATE PROTECTION

Dealer Application Form

The following must be filled out and completed in order to qualify for dealer pricing. If any of the items below are missing, you will be delayed dealer pricing. Please make sure everything is complete before submission.

Date _____

Phone Number _____ Fax Number _____

Legal Business Name or DBA _____

Street Address _____

City _____ State _____ Zip _____

Website _____ Email Address _____

Estimated initial order? 0-50 Units -35% Discount 50-75 Units -40% Discount

75-100 Units -45% Discount 100+ Units -50% Discount

Are you an authorized dealer for a major manufacturer (Honda, Yamaha, Polaris, Can AM, Kawasaki)

Yes No If yes, what brands? _____

Bank Name _____ Phone _____

Bank Address _____ Bank Contact _____

If California Dealer - State Resale # _____ *Required only if CA Dealer*

-----Continuing Guarantee-----

The undersigned _____ (Print Name) hereby guarantees payment of all money due and owing to SEALSAVERS Inc. by _____ (Print Company Name) for purchases previously made or made in the future from SEALSAVERS Inc. and agrees that guarantor will pay the full amount owed to SEALSAVERS Inc in the event that _____ (Company Name) does not pay the amount owed when due.

Signature _____ Date _____

Phone: (951)757-0458 **Fax:** (951) 244-1465 **Email:** Info@SealSavers.com
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