



AUTHORIZED DEALER APPLICATION

Thank you for your interest in becoming an Authorized Dealer for Sierra LED LLC. Please complete the following application and include copies of your company's State Business license and State Reseller's Certification. California Companies, please complete the State of California General Reseller Certificate.

Company Name: _____ Legal Name: _____

Contact Name: _____ Telephone: _____ Fax: _____

Contact Email: _____ Website Address: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Year Business Established: _____ Resale Number _____

Business Classification: Sole Proprietor Partnership Corporation Store Distributor Mod Builder

Number of Locations: _____

Product Focus: JEEP TruckATV UTV Truck/Buggy Other _____

OWNERS OR PRINCIPALS:

Name: _____ Title: _____ Personal Phone: _____

Personal Address: _____

City: _____ State: _____ Zip Code: _____

Name: _____ Title: _____ Personal Phone: _____

Personal Address: _____

City: _____ State: _____ Zip Code: _____

TRADE REFERENCES:

Name: _____ Address: _____ Phone: _____

Fax: _____ Email: _____

Name: _____ Address: _____ Phone: _____

Fax: _____ Email: _____

Bank Name: _____ Account #: _____ Address: _____

Bank Contact: _____ Phone: _____ Fax: _____

APPLICATIONS WILL NOT BE CONSIDERED UNLESS THE OWNER, PARTNER OR A CORPORATE OFFICER SIGNS THE APPLICATION.

By signing below, applicant allows Sierra LED LLC to request pertinent trade reference and banking account information and background to verify submitted credentials stated above.

Applicant's Signature: _____ Date: _____

Applicant's Printed Name & Title: _____