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### Kure-International, Inc. Dealer Application Form

Business Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Type of Business \_\_\_\_\_ WD \_\_\_\_\_ Retail \_\_\_\_\_ Repair \_\_\_\_\_ Internet \_\_\_\_\_

Facility Info \_\_\_\_\_ Storefront \_\_\_\_\_ Workshop \_\_\_\_\_ Dyno Tuning \_\_\_\_\_ None \_\_\_\_\_

AOL Instant Massanger Screen Name \_\_\_\_\_

Company Website \_\_\_\_\_

Email Address \_\_\_\_\_

Federal ID # \_\_\_\_\_ Resale # \_\_\_\_\_

Owner/Principal Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax Number \_\_\_\_\_

Alternate Contact \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax Number \_\_\_\_\_

**Trade References**

Business Name \_\_\_\_\_ Contact \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

Business Name \_\_\_\_\_ Contact \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

Business Name \_\_\_\_\_ Contact \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

**\*Please print this form clearly as we will need to transfer all the information to our computer system.**

**\*If your company is located in state of California, please fill out the California Resale Certificate as well.**