



# Dealer Application

DATE: \_\_\_\_\_

## CONFIDENTIAL INFORMATION:

COMPANIES NAME: \_\_\_\_\_ PH: \_\_\_\_\_

COMPANIES ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

BUSINESS WEBSITE: \_\_\_\_\_

BUSINESS TYPE:      PARTNERSHIP:                      PROPRIETORSHIP:                      CORPORATION:

YEAR ESTABLISHED: \_\_\_\_\_ PST #: \_\_\_\_\_ GST #: \_\_\_\_\_

SPECIALITY:              MOTORCYCLE:              SNOWMOBILE:              PWC:              MTB:

DEALER FOR(BRANDS): \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_ RESIDENTIAL PH: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_

## CONTACT INFORMATION:

PARTS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SERVICE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ACCOUNTING: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I WOULD LIKE TO RECEIVE MONGOOSE INFORMATION & PROMOTIONS VIA EMAIL:      YES:              NO:

## SUPPLIER REFERENCES(IN THIS INDUSTRY):

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I UNDERSTAND THERE WILL BE NO SERVICE CHARGE IF OUR ACCOUNT IS PAID WITHIN 15 DAYS AFTER BILLING DATE. IF WE DEFER THE PAYMENT, OR ARE LATE ON THE PAYMENT WHETHER INTENTIONAL OR UNINTENTIONAL, WE WILL PAY A SERVICE CHARGE OF 18% PER ANNUM (1.5% MONTHLY) ON THE UNPAID BALANCE OVER 30 DAYS.

I ACKNOWLEDGE AND AGREE THAT ANY RETURNS MUST BE APPROVED BY MONGOOSE AND A MINIMUM OF 15% RESTOCKING CHARGE WILL BE APPLIED TO ALL ITEMS RETURNED FOR CREDIT.

I UNDERSTAND THAT ALL ITEMS PURCHASED REMAIN THE PROPERTIES OF MONGOOSE UNTIL COMPLETE AND FINAL PAYMENT.

MONGOOSE IN ITS SOLE DISCRETION REQUIRES THE APPLICANT TO PROVIDE VISA OR MASTERCARD FOR REFERENCE BEFORE ACCEPTING THIS APPLICATION FOR CREDIT. THE CREDIT CARD WOULD BE USED BY MONGOOSE TO PAY ONLY ANY AMOUNTS OWING BY THE APPLICANT WHICH HAVE BEEN OUTSTANDING FOR MORE THAN 45 DAYS. I (WE), THE APPLICANT(S), EXPRESSLY AUTHORIZES MONGOOSE TO TAKE WHATEVER STEPS NECESSARY TO USE THIS CREDIT CARD IN PAYMENT OF THOSE OUTSTANDING AMOUNTS.

AUTHORIZED SIGNATURE: \_\_\_\_\_



## Credit Card Authorization Form

DATE: \_\_\_\_\_

I \_\_\_\_\_ of \_\_\_\_\_ authorize  
(NAME) (COMPANY)

Mongoose Machine And Engineering Ltd. to charge my credit card for Parts and/or Services rendered. Not to exceed amount shown:

Amount: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Card 3 digit security code: \_\_\_\_\_ (On back of card to the right of the signature)

Issue Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Name as it appears on Card: \_\_\_\_\_

\_\_\_\_\_  
Signature Date

Please fill out and email to: [info@mongoosemachine.com](mailto:info@mongoosemachine.com)