



Curtis Industries Dealer Credit Application

Company Information

Company Name _____

Billing Address _____

City/State/ZIP _____

Physical Address if different from Billing Address _____

City/State/ZIP _____

Phone _____ Fax _____

E-Mail (**Required**) _____ Website _____

Owner/CEO Name _____

Accounts Payable Contact _____ Federal ID # _____

No. Years in Business _____ No. of Employees _____ No. of Locations _____

Business Information

Franchise dealer Rental Service Parts/Repair Other _____

Franchise Dealer For (Required) – Check as many as apply

Tractor Cabs Power Sports Golf Car Snow & Ice Other _____

Authorized Dealer For (Required)

John Deere Kubota Massey Ferguson New Holland/CASE Yanmar Bobcat

Kioti Toro Mahindra TYM McCormick Branson Other Tractor*

Polaris Yamaha – UTV/ATV Arctic Cat Honda Other UTV/Power Sports*

Kawasaki Can-Am Yamaha Golf E-Z-GO Golf Club Car Golf Other Golf*

*If 'other' checked, please provide details _____

Type of Equipment Dealer _____ Curtis Product of Interest _____

Sales Contact Person _____ Phone _____

Please return completed form via INFO@curtiscab.com or FAX: 508.854.3377



Reference Information: Bank

Bank Name _____

Branch _____ Fax _____

Account # _____ Contact _____

Reference Information: Trade (provide top three trade references ranked by amount)

Vendor Name _____

Contact _____ Fax _____

Address _____

City/State/ZIP _____

Vendor Name _____

Contact _____ Fax _____

Address _____

City/State/ZIP _____

Vendor Name _____

Contact _____ Fax _____

Address _____

City/State/ZIP _____

The Undersigned represents the facts contained in this Credit Application are complete and accurate and authorizes Curtis Industries LLC to contact the Financial Institution and Trade Credit References listed above.

The undersigned further authorizes those Financial & Trade Credit References to provide credit information regarding this company to Curtis Industries, LLC upon request without further authorization being required.

Signature _____ Date _____

Name & Title (please print) _____

Internal approval: _____

Please return completed form via INFO@curtiscab.com or FAX: 508.854.3377