



DEALER APPLICATION

ACCOUNT POLICY

In order to establish an account, you must first meet the following requirements:

1. Operate a full-time business at least 5 days a week to include hours on Saturday.
2. Operate from a brick and mortar location with a store front. (We do not sell to Internet only operations)
3. Have all necessary Federal, State and Local Licenses
4. Maintain an inventory
5. Operate a service area for installing custom features like lights, furnaces, TV's, sound systems, etc

INTELLI-CORE LLC does not sell to individuals who operate out of their homes or who wish to purchase solely for their own use or for that of their friends. All applications are subject to approval and acceptance for processing does not constitute our approval of the application.

BUSINESS INFORMATION

| | | | |
|--------------------------|--|---------------------------|--|
| Date: | | Officers: | |
| Legal Name: | | Name: | |
| Business Name (DBA): | | Name: | |
| Owner's Name(s) | | Authorized Buyers: | |
| Billing Address: | | Name: | |
| Billing Address: | | Name: | |
| City, State, Zip: | | Store Hours: | |
| Business Address: | | Monday: | Tuesday: |
| Business Address: | | Wednesday: | Thursday: |
| City, State, Zip: | | Friday: | Saturday: |
| Email Address: | | Sunday: | |
| Phone Number: | | Entity Type (Circle one): | LLC, S Corp, C Corp, Sole Proprietorship |
| Fax Number: | | Year Established: | |



ACCOUNT REQUIREMENTS

Please enclose the following with this application:

- At least two photographs of the business.
 - Showing the exterior building and store sign
 - Showing the interior of the building including inventory, fixtures, or space to be occupied (if a new business)
- Copies of Resale and/or Sales and Use Tax Permits/Licenses

BUSINESS QUESTIONS

How long has the above business been operating this business?

How long has the present owner been operating this business?

What are the total annual sales (all products)? (Estimate if new business.)

What history of selling consumer durable products do your staff have?

Please circle the products that you presently carry or that you are planning to carry in your retail store:

| | |
|-------------------------------|--|
| Utility Trailers | Recreational Trailers |
| Fish Houses | Recreational Vehicles |
| Power Sports | Boats/Marine Equipment |
| Outdoor Sporting Goods | Freshwater / Fly / Ice Fishing Products |



TRADE REFERENCES

If none, please list other suppliers.

1. Bank Name

Address _____

City, State Zip _____

Phone Number with area code _____

Contact Person _____

2. Name

Address _____

City, State Zip _____

Phone Number with area code _____

Contact Person _____

3. Name

Address _____

City, State Zip _____

Phone Number with area code _____

Contact Person _____



ADDITIONAL INFORMATION

Approved dealer must purchase 4 units per quarter at a minimum annual level of no less than 20 units. Upon ordering an unit, a deposit of no less than two thousand dollars must be received. Terms upon delivery to dealer are normally COD. Dealer will be required to complete a pre-delivery inspection (PDI) before they conduct retail business per trailer. Upon customer delivery, dealer must review owner’s manuals with retail customer and register the customer’s warranty/product registration. I understand and agree to all the service and delivery policies as specified in the current Terms & Conditions. Proper use of CORE ICE intellectual property will be provided with the approval of this application. Any proposed use of CORE ICE intellectual property must be submitted in writing to INTELLI-CORE LLC for approval; in its sole discretion, before use. You agree to promptly discontinue the use of CORE ICE intellectual property upon receipt of written notice from INTELLI-CORE, in its sole discretion. You further agree not to infringe CORE ICE’s intellectual property, and disclaim all right, title, and interest in or to CORE ICE’s intellectual property.

I agree that I will be responsible for all debts by the business listed on this application, and for all collection, attorney fees, and finance charges incurred by INTELLI-CORE, LLC..

Your fax number and email address are used to communicate to you. By providing your fax number or e-mail address you are giving written permission to receive related information from INTELLI-CORE, LLC that may be of interest to you. We will not share this information or use it for any other purpose. You may opt out of receiving faxes or e-mail from us any time in the future.

By signing this application, you hereby certify your authority to do so on behalf of the applicant and that to the best of your knowledge all information provided herein is accurate. You also hereby waive all privacy of credit information rights, laws, or regulations including the Consumer Credit Protection Act of 1968 with all amendments and give permission to INTELLI-CORE, LLC to verify all facts disclosed herein including the release of bank information. A signed, faxed copy of this application will be considered the original. Owner or officer signature required.

Signature: _____

Date: _____

Written Name: _____

Title: _____