



DEALER INFORMATION SHEET

Dealer Name:		
Billing Address		
City:	State:	Zip Code:
Shipping Address		
City:	State:	Zip Code:
Dealer Contact:	Contact Phone /Extension:	
Contact Fax:	Contact Email Address:	
Dealer Electronic Menu System:		

DEALER'S PREFERRED VENDOR LIST

Detail Shop:	Contact Person:	Phone Number/Email
Body Shop:		
Windshield Technician:		
Dent Technician:		
Alloy Wheel Technician:		

