

Dealer Application

57 Gasoline Alley, Suite A · Indianapolis, IN 46222 Ph (317) 757-8668 · Fax (317) 222-6360

Company Na	me:			Owner:				
Address:								
City:			State:	Zip:				
Ph:()		Fax: <u> (</u>)				
Website:			Email:					
Person(s) Au	thorized to Purchas	e:						
Tax ID#		Years in Busi	ness:	Daily Hours:				
Estimated Ar	nnual Sales Volume	with HPI: <u>\$</u>		\$				
Does your co	Does your company offer performance builds and/or dyno tuning? Yes No							
Billing Addre	ss (If Different):							
City:		State: Zip:						
Trade Refere	ences:							
Name	Location	Phone	Acco	ount # Open/Check/Other				
replaced or a cre responsibility for	edit allowed at Horsepow r parts in transit. No reinb	er Inc's option. Any transit ursement claims for labor,	damage must be res further processing c	workmanship or material. Defective parts will be solved directly with carrier. Horsepower Inc. has no losts, handling, administrative costs, or service operty of Horsepower Inc., and will not be returned				
under any circur		lave been replaced for any	reason become pro	perty of Horsepower Inc., and will not be returned				
		ns and are willing to a	-					
Name:		Signe	ed:					
Title:		Date	:					



Email Address

l,	, authorize Horsepower					
Inc./Horse credit card	•	-	rge my business and/or personal rchases			
X Signature			Date			
One t	ime purch	ase.				
Please	e put this (card on fi	ile for all future purchases.			
Card Type:	Circle one.)	VISA	Master Card DISCOVER NETWORK AMERICAN EXPRESS			
Card Number						
Expiration Date (r	mm/yy)		Security Code #			
Cardholder Name	:		Business Name			
Credit Card Billing	g Address		Phone Number			
City	State	Zip	Fax Number			