

BRs Custom Bars  
Phone (716) 679-1966  
Fax (716) 679-1969  
Email brscustombars@gmail.com  
www.brcustomcycles.com  
www.brscustombars.com



Please Attach or Fax the Following:  
1) A copy of Business License  
2) A copy of your Resale Card/  
Certificate (if applicable in your state)  
3) A copy of your yellow page OR  
magazine ad, picture of store front,  
OR business card.

### Dealer Application

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Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Billing Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_  
\_\_\_\_\_ Shipping Address: \_\_\_\_\_  
\_\_\_\_\_  Sole Proprietorship  Partnership  
\_\_\_\_\_  Corporation \_\_\_\_\_ State Incorporated

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### Trade References

Company Name \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Account # \_\_\_\_\_  
Company Name \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Account # \_\_\_\_\_  
Company Name \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Account # \_\_\_\_\_

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### Payment Information

BR Custom Cycles, Inc. only accepts payment by charge card or via Pay Pal account. If you wish to set up payment by company check please contact the office.

Charge Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_ Verification Code \_\_\_\_\_  
Or Pay Pal Account \_\_\_\_\_

The above named customer hereby makes an application for credit with BR Custom Cycles, Inc. and warrants all information contained herein is true and correct and authorizes it use for the purpose of obtaining trade credit. The customer agrees to make payments to BR Custom Cycles, Inc. for all amounts due according to the terms provided in the Terms of Sale. Should the above customer default on any payments, BR Custom Cycles, Inc. shall have the right, without prior consent to impose finance charges per month on any unpaid balances and/or declare all invoices due and payable. In the event of default, the customer agrees to pay all costs, including but no limited to collection fees and attorney's fees.

Applicants Signature \_\_\_\_\_  
and date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_