



ACCOUNT APPLICATION

The Tire Rack Wholesale opens your door to a huge selection and inventory of wheels, tires, suspension components and services. We hope our relationship provides your business with unlimited opportunities.

This application is intended to: A) Confirm your business meets the fleet tire program customer criteria. B) Determine the most suitable method of payment for your purchases.

NAME OF BUSINESS			
BILL TO ADDRESS	CITY	STATE	ZIP CODE
SHIP TO ADDRESS	CITY	STATE	ZIP CODE
PHONE NUMBER	FAX NUMBER	CELL NUMBER	

E-MAIL ADDRESS	WEBSITE URL
I would like to receive email at the above address from Tire Rack Wholesale featuring the newest products as well as helpful tips on using the website. <input type="checkbox"/> Yes <input type="checkbox"/> No	

ACCT PAYABLE CONTACT	ACCT PAYABLE CONTACT E-MAIL ADDRESS
I would like to receive email at the above address from Tire Rack Wholesale's credit department regarding my account when required. <input type="checkbox"/> Yes <input type="checkbox"/> No	

TYPE OF BUSINESS: Describe your type of business.

IS YOUR BUSINESS A: SOLE PROPRIETORSHIP PARTNERSHIP CORPORATION OR LLC?

NAME OF OWNER(S) OR CORPORATE OFFICER(S) (Include titles)

HOW LONG HAVE YOU BEEN IN BUSINESS?

NUMBER OF LOCATIONS:

HOW MANY VEHICLES ARE IN YOUR FLEET?

HOW MANY TIRES DO YOU PROJECT PURCHASING MONTHLY?

DO YOU CURRENTLY HAVE AN ACCOUNT WITH THE TIRE RACK WHOLESAL? ACCOUNT #

REQUIRED

-----Please include a copy of your Business License with this application.

FLEET ACCOUNT PAYMENT OPTIONS: Approval is based on credit history and reference responses.

Please select the type of account you would prefer.

- COD ACCOUNT CERTIFIED CHECK:**
 - A) Pay with U.S. postal money order or cashier's check upon delivery.
 - B) Orders may require a deposit. Company business credit cards are acceptable for deposit.

- COD COMPANY CHECK ACCOUNT:**
 - A) Requires that your Company has been in business for a minimum of one year.
 - B) Requires a clean credit history and no NSF checks.

- OPEN ACCOUNT:**
 - All invoices dated prior to the end of any given month are due on the 10th day of the following month.

- A) Requires an excellent credit history.
- B) Requires significant credit line with current suppliers.
- C) *e-Statement:* Upon approval, I am interested in receiving my statement via e-mail. Yes No

PLEASE LIST THREE MAJOR AUTOMOTIVE CREDIT REFERENCES THAT ARE NOT RELATED TO YOUR BUSINESS
*** FAX NUMBERS ARE REQUIRED**

1) NAME
ADDRESS
CITY STATE ZIP CODE
PHONE * FAX
VENDOR ACCT # CONTACT NAME

2) NAME
ADDRESS
CITY STATE ZIP CODE
PHONE * FAX
VENDOR ACCT # CONTACT NAME

3) NAME
ADDRESS
CITY STATE ZIP CODE
PHONE * FAX
VENDOR ACCT # CONTACT NAME

BANK INFORMATION

BANK NAME ADDRESS
CITY STATE ZIP CODE
PHONE CONTACT NAME

- It typically takes 1 to 2 weeks to process a fleet application; however, it depends on the completeness of this application and response time from the references you listed.
- Password Protection is available. Contact the Credit Department to sign up following the approval of your fleet account.
- Whom would you like us to contact with questions on this application?

NAME PHONE OR E-MAIL

I hereby authorize the company to whom this application is made, any credit bureau, or other investigative agency employees to investigate the references herein given and any statements or other data obtained from me or any other person pertaining to the company's credit and financial responsibility. In the circumstance that outside intervention is required to collect payment, I agree to pay any additional fees resulting from such collection activities.

SIGNATURE (required) PRINTED NAME

TITLE (Owner/General Mgr/Officer) DATE

- To contact us regarding the status of this application

Please call: 866-566-5140 EXT: 217 - Jocelyn EMAIL: jocelyn@tirerack.com

TIRE RACK SALES SPECIALIST:

PHONE: 866-566-5140 **EXT:** **E-MAIL:**