



DIVISIONS OF LEMANS CORPORATION

3501 KENNEDY RD. • P.O. BOX 5222 • JANEVILLE, WI 53547-5222 • PHONE 608/758-1111 • FAX 608/758-1097

Greetings!

Thank you for your interest in becoming one of our Dealers. We are the industry's leading after-market accessory distributors. We sell directly to dealers, not consumers or sub-distributors. We believe that we have a lot to offer you, including:

- 9 of the largest, easiest to use catalogs in our industry.
- Multiple state of the art distribution centers for International Shipping
- Over 150,000 items available.

Required materials

To ensure quick processing of your application, please fill out the attached form completely and send with all required material to us by e-mail, fax, or mail.

-- A copy of your **Business License or Government License**.

-- **Photographs** of the inside and outside of your store including Store Front, Signage, Posted Hours, Display/Service Area(s) and any additional images that would be helpful. **Photographs by E-mail or Mail only please!**

Catalogs

After approval of your application, you will receive an email confirmation with your new Dealer Number and a Catalog Order Form. You will be charged **\$20.00 per catalog**. These fees will be refunded after your first order. You will be able to select from the following catalogs:

Drag Specialties Fatbook & Old Book
(Specializing in V-Twins)

Parts Unlimited Off-Road

Parts Unlimited ATV/UTV

Parts Unlimited Street

Parts Unlimited Snowmobile

Parts Unlimited Watercraft

Parts & Accessories for Indian

Helmet & Apparel

Tire & Service

Additional requirements

INTERNATIONAL DEALERS:

- **Initial order:** Your initial minimum stocking order must be at least **\$5,000** of "shippable" product. All accounts are required to maintain **\$7,500/yr** in annual sales. (Confirm with Sales Rep at time of Set-up).
- **Future orders:** Minimum order amount is **\$300.00**
- **Shipping Options:** UPS Expedited, UPS Express, Express Saver, DHL, Bax/Global, FedEx Priority or Economy or Select an approved USA Freight Forwarder (provide address at time of order.)

PUERTO RICO DEALERS:

- **Orders / Minimums / Sur-Charges:** Same as Domestic Dealers – Contact your sales rep with questions.
- **Shipping Options:** UPS Red, UPS Blue, Air Parcel Post

- **Terms of Payment:** Pre-Payment
- **Payment must be received within 10 days of receipt of Proforma Invoice or order will be cancelled.**
- **Method of Payment:** Visa, Master Card, Discover, Wired Funds, Irrevocable Standby Letter of Credit.
- Dealer is responsible to ensure Dealer is legally able to purchase and sell the products being ordered, including, confirming any applicable product certifications.

For further information, please contact our International Sales department.

Phone: 608-758-1111 Ext. 4990 Fax: 608-758-1097

Email: InternationalOrders@Parts-Unltd.com



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INTERNATIONAL DEALER APPLICATION

Legal Firm Name _____

Business Name of Store: _____

Street Address _____

City _____ Prov. / State _____ Postal Code _____ Country _____

Store Phone Number _____ Fax Number _____

E-mail Address _____

Website Address _____

Billing address, if different _____

Primary Business is in the Motorcycle, ATV, Snowmobile or Watercraft Market: [] Yes [] No

Type of Ownership: (check one) [] Individual [] Partnership [] Corporation

Owners First & Last Name: _____

Home Address _____

City _____ Prov. / State _____ Postal Code _____

Country _____ Home/Mobile Phone _____

Owners First & Last Name: _____

Home Address _____

City _____ Prov. / State _____ Postal Code _____

Country _____ Home/Mobile Phone _____

Written change of Name & Ownership is required.

Dealer is responsible to ensure Dealer is legally able to purchase and sell the products being ordered, including, confirming any applicable product certifications.

Shipping Information:

[] Ship to business address above

[] Ship to USA Freight Forwarder:

Freight Forwarder Name: _____

Address: _____

City / State / Zip: _____

Contact Name: _____ Phone: _____

Email: _____

Business Contacts (other than owners) _____



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Description of your business:

Motorcycle: Street Offroad V-Twin
 ATV UTV Snowmobile Watercraft
Other: _____

Accessory Store Repair Shop
 Internet Other: _____

OEM (Franchise) dealer for: Arctic Cat BMW Can-Am Ducati Harley-Davidson®
 Honda Indian Kawasaki KTM Polaris Sea-Doo Ski-Doo Suzuki
 Triumph Yamaha Other: _____

Store Hours & Days Open: _____

Trade Suppliers that you currently order parts from (In the Motorcycle Industry):

Company Name: _____ Phone: _____
Contact Name: _____ Fax: _____
Address: _____

Company Name: _____ Phone: _____
Contact Name: _____ Fax: _____
Address: _____

Company Name: _____ Phone: _____
Contact Name: _____ Fax: _____
Address: _____

I hereby affirm that all of the above information is correct.

Owner/Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____

Please complete this application and return with other required materials by e-mail, fax, or mail:

LeMans Corporation
Attn: International Sales
3501 Kennedy Road
PO Box 5222
Janesville, WI 53547-5222, USA

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Fax: 608-758-1097
Phone: 608-758-1111 Ext 4990