

REQUEST FOR DEALER INFORMATION

If you are interested in receiving more information about Midwest Dealership opportunities, please fill out this form and submit it to us. Qualified applicants will receive a more complete information package.



LEGAL COMPANY NAME

GST NO.

BUSINESS NAME IF DIFFERENT

PHONE

ADDRESS

FAX

CITY

PROV

Website

POSTAL CODE

EMAIL

YRS IN BUSINESS

NAMES & PHONE NOS.
OWNERS, SHAREHOLDERS
PARTNERS

BUSINESS TYPE

RECREATIONAL VEHICLES
CURRENTLY OWNED &
OPERATED

BRANDS
CURRENTLY SOLD:
NEW/USED
ATV/DIRTBIKE

DESCRIBE ABILITY TO
SET-UP AND SERVICE
YEARS OF EXPERIENCE
TICKETS, THIRD PARTY

DESCRIBE YOUR
BUSINESS
FACILITY
(email picture)

LIABILITY INSURANCE

INSURANCE COMPANY NAME

AMOUNT OF INSURANCE

EFFECTIVE DATE

POLICY NO.

DESCRIBE YOUR
COMMITMENT TO
ADVERTISING

DESCRIBE YOUR GOALS
IN BECOMING A
MIDWEST DEALER