



Sabertooth Motorcycles Prospective Dealer Questionnaire

Completion of this questionnaire by prospective Dealer does not obligate Sabertooth Motorcycles or prospective Dealer in any way. Prospective Dealer shall not be deemed to be accepted and approved until the Sabertooth Motorcycles Sales and Service Agreement is executed in its entirety. In addition to this questionnaire, prospective Dealer is required to submit a completed Sabertooth Motorcycles Dealer Application along with any requested documents prior to completing the Sabertooth Motorcycles' Dealer application process. Information provided will be used by Sabertooth Motorcycles for determining the suitability of prospective Dealer to become a Sabertooth Motorcycles Dealer and will not be used for any other purpose.

Fax completed questionnaire to (864) 989-1957, Attn: Dealer Development

General Dealership Information:

Dealership Legal Name: _____

Dealership Trade Name: _____

Dealership Street Address: _____

City: _____ State: _____ ZIP Code: _____

Phone: _____ Fax: _____ Website: _____

Contact Person: _____ Position: _____

Phone: _____ Fax: _____ E-Mail: _____

Dealership Manager: _____

Dealership Primary Owner: _____

How Long Has Dealership Been in Business? _____

Dealership's Legal Form (check one): sole proprietorship partnership corporation LLC other _____

Business Hours: M: _____ T: _____ W: _____ Th: _____ F: _____ S: _____ Su: _____

Type(s) of Vehicle(s) Sold by Dealership: _____

Brief Description of Dealership Business: _____

Brief Description of Dealership Location (Including Area Demographics & Population): _____

Dealership Sells the Following Motorcycle Brands: _____

Dealership Services the Following Motorcycle Brands: _____

Does the Dealership Rent Motorcycles? YES NO

Approximate Square Footage of Dealership: Motorcycle Showroom: _____ Service Area: _____

Parts Area: _____ Accessories and Apparel Area: _____ Parking Lot: _____

Person Completing This Questionnaire: _____

Position with Dealership: _____