

1. BUSINESS INFORMATION

Legal business name *

DBA / trade name (if different)

Entity type:

LLC

Corporation

Sole proprietorship

Partnership

Other:

EIN (optional — for invoicing / net terms)

Years in business

Website

Business street address *

City *

State *

ZIP *

2. PRIMARY CONTACT

Full name *

Title / role

Phone *

Email *

3. BILLING & ACCOUNTING

Billing contact same as primary

Billing address same as business address

Billing contact (if different)

Billing phone

Billing email

Billing address (if different — street, city, state, ZIP)

Payment:

Per service

COD

Net terms*

4. YOUR FLEET

Vehicle types *

Vans

Pickups

Box trucks

Heavy duty

Trailers

Other

How many vehicles?

Tire preference:

New

Used

Either

Tire sizes & quantities (e.g., 8x 225/75R16)

Timing & notes (when do you need service — one-time or recurring?)

5. CERTIFICATION

I certify this information is accurate and that I am authorized to request a fleet account on behalf of this business.

Signature

Printed name

Date