

	For office use only
Date	
Customer ID	
ine of Credit <u>\$</u>	

Dealer Application

KIM	BIKE	INDUSTRIE









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Quick Start				
Business Name		Legal Corporate	Name (if different)	
Street Address	City	State	Zip Code	
Mailing Address (if different)	City	State	Zip Code	
Phone	Fax	We	osite Address	
Email		Request	ed Password	
Account Sales Representative (if you were re	eferred):			
Federal ID#	DUNS #		State Resale# (must include co	ertificate)
Credit Card Authorization				
I/We(print full name)		hereb	y authorize Messingschlager dba	a North America Cycles
to charge the credit card(s) listed below for	monies owed to Me	ssingschlager , LLC (dba North America Cycles for b	icycles,
scooters, and/or various accessories and se	rvices purchased.			
Full Name on Card				
Credit Card Number E		_ Expiration	Security Code	
Billing Address	Billing Address		State	Zip Code
Amount of Credit you are requesting Type of Ownership Sole Proprietorsh Date Business Started Years U If Corporation: State of Incorporation Business Space: Rent Own Landlord/Mortgagor's Name City Stat Use inventory to borrow from your bank?	Jnder Current Mana Store Si	gement q Ft Address Zip Code	Corporation LLC # of Employees La Date Incorporated Selling Floor Sq Ft	Wilcor ast Year's Total Sales
Bank Address		City	State	Zip Code
Have you ever filed bankruptcy? Yes	No If	yes: Year	Under what nan	ne
Have any suits or liens been filed against this				
***Most recent financial statement with inco	·	,		,
MOST recent illiancial statement with incol	ne statement & bala	ince sneet must be in	Guded. Date of financial statem	ent
Principal Owner(s)				
Full name	Title	Phor	ne SS#	Birth Date
Home Address		City	State	Zip Code
Full name	Title	Phon	e SS#	Birth Date
Home Address		City	State	Zip Code

Vendor References (those that ha	ve extended open terms)		
Name	Address		Account #
Phone	Fax		
Name	Address		Account #
Phone	Fax		
Name	Address		Account #
Phone	Fax		
	Address		Account #
	Fax		
Bank Reference & Authorizatior below, I authorize the bank named to rele	1 Please complete and sign the authorization below ease the requested information to Messingschlager,	r, and return this entire form to us with yo , LLC dba North America Cycles for the p	our credit application. By signing my name purpose of credit extension.
I/We authorize (bank name)		to furnish Messingschlager, LLC	dba North America Cycles with the
information requested below, conce	erning all of my/our business accounts under	the name(s)	
of: Account/Business Name(s)	Contact Name	Account #	Loan #
Bank Address	City S	tate Zip Code	Phone
Signature (as it appears on bank rec	cords)	Date	
simple basis on the amount of the in-voic reasonable attorney's fees and collection provision of attorney's fees and collection statements are true and correct. Verificati Messingschlager, LLC dba North America authorization may be used to obtain such reporting services and suppliers. If the creguarantee payment for all products purch application does not assure applicant will	a Cycles. If we fail to pay by the due date, we agree e. If Messingschlager, LLC dba North America Cycle costs, or, at the option of Messingschlager, LLC dba costs is void where prohibited by applicable laws. on may be obtained from any source named in this a Cycles shall request for the purpose of verification information. I/we hereby authorize Messingschlage did customer is a corporation, partnership, or an LL hassed on credit by the corporation, partnership, or I be extended open credit terms. I/We hereby agree ALES: Mail Order or Internet Sales, including but racycles	es is required to take legal action to enfo a North America Cycles a specific sum o The undersigned certifies that he/she is application. I/we authorize my/our cred of any information or statements contai er, LLC dba North America Cycles to pro .C, then those signing this application, w .LC. See Personal Guarantee on page 2 e to comply with the terms of this agreer	orce payment, we agree to pay costs including of the total amount due, provided that this a authorized to execute this document and that all litor(s), financial institution(s) such information as ined in this application and that a copy of this ovide information contained herein to other credit whether signing as an officer or not, personally for full details. Completion of this credit ment and all applicable laws.
Signature of Applicant		Title	Date
Signature of Co-Applicant		Title	Date
guarantee to pay and be responsible for limited to collection charges and/or attor State of Iowa, USA; and any default in the subject to the exclusive venue in the cour dealer conducts business. This shall be ar there-to. Guarantor represents and warra conduct thereof by debtor, and neither the	on of the extension of credit by Messingschlager, LL all payments for all sums, balances and accounts duney's fees. This Personal Guarantee and any such expayment of any credit extension of applicant or dists and county where Messingschlager, LLC dba Non open and continuing guarantee and shall continuents that the extension of credit being required are the credit sought, nor this guarantee is being provide personal guarantee and agree to be bound by its terms.	ne Messingschlager, LLC dba North Ame ktension of credit provided to Applicant pute arising out of any such extension o rth America Cycles conducts business or e in force notwithstanding any change in hose solely pertaining to the Applicant's ed, for any personal, family or household	erica Cycles from Applicant, including but not shall be governed by the internal laws of the of credit, or arising out of this guarantee, shall be r in the courts in the county and state where not the form of such indebtedness existing priors trade or business as a customary part of the d purpose.
· ·			
Guarantor Signature		Print Name	Date

Freight Shipment Questionnaire

Delivery Con	/ Contact Name: Phone Number:							
Delivery Ado	dress:			C	ity:	_ State:	ZIP:	
Email Addre	Email Address for Tracking:							
A al alua a a T								
Address Typ	oe							
Business	Resid	ence	Hotel	School	Storage	Unit G	Sov. Building	
Trade Show	/ Event	Other						
Is There A G	ate or Acces	ss Code Requ	ired For Deli	very?		Yes	No	
Do You Have	e A Loading	Dock?				Yes	No	
Do You Have A Fork Lift?						Yes	No	
Do You Have	e A Pallet Ja	ck?				Yes	No	
Do You Require A Lift-gate For Freight Delivery?					Yes	No		
Do You Need	d An Inside [Delivery/Help	Unloading?			Yes	No	
Do You Need	d An Appoin	tment Time F	or Delivery?			Yes	No	
Is Your Busir	ness In A Lim	nited Access A	Area? (Main	St, strip mall, o	etc.)	Yes	No	
Please Sele	ct Delivery	Days/Times	:					
	Mon	Tue	Wed	Thu	Fri	Sat	Sun	
Check If Available								
Start Time								
End Time								
A TI /				. 0				
Are There Any Other Special Delivery Instructions?								

*Any charges incurred from inaccurate information will be the responsibility of the customer.



North America Cycles

2105 SE 5th Street, Ames, IA 50010 **email:** info@nacycles.com

phone: (844)622-2453 fax: (515)232-0279 www.nacycles.com



Messingschlager USA Banking Details

Via Mail:

Messingschlager USA, LLC Drawer #2937 PO Box 5935 Troy, MI 48007-5935

Via Domestic Wire or EFT:

Crestmark
Troy, Michigan
ABA # 072413764
For the account of
Messingschlager USA, LLC
Account # 5152320277

Via Intl. Wire or EFT:

CIBC Bank USA
120 S. LaSalle
Chicago, IL 60603 USA ABA
071006486 SWIFT Code
PVTBUS44 Account Name:
Pathward Beneficiary Name:
Messingschlager, USA LLC
Account # 2381096

Sue Cunningham Vice President of

Vice President o HR & Logistics

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Sophie Tran

Vice President of Finance

Phone: 515-232-0277 Fax: 515-232-0279 sophiet@cyclefg.com

Erica Renz Fisher

Accounting Manager

Phone: 515-232-0277 Fax: 515-232-0279 ericar@cyclefg.com