



Thank you for your interest in becoming a Suspension Direct Authorized Dealer. Please review the information below carefully and complete the accompanying application in its entirety. All fields are required for your application to be processed.

DEALER AUTHENTICITY

Suspension Direct, Inc. (SDI) is committed to protecting our legitimate dealers from unfair competition. As such, proof of business legitimacy is required prior to the establishment of a dealer account. The following documentation must be submitted:

- **Completed dealer application with signature and date**
- **Credit Card Authorization (optional)**
- **Copy of a current local business license and current sales tax license**
- **Two business cards**

All new dealer applicant inquiries will be directed to the SDI Sales Office. A SDI Dealer Number will be issued only after a sales representative has verified that the applicant meets Suspension Direct, Inc. requirements.

Completed dealer applications may be submitted via email to sales@suspensiondirect.com or mailed to:

Suspension Direct, Inc.

571 B Crane Street

Lake Elsinore, CA 92530

Please allow 1–2 weeks for processing following receipt of your completed application.



Please help us in processing your application as quickly as possible. Be sure to:

- Complete Dealer application – *Application will be delayed if all requested information is not supplied*
- Credit Card Authorization (optional)
- Signature & date requested below
- Copy of current local business license & current Sales tax license
- Business cards (2)

1) Legal Business Name _____

2) Shop Name _____

Street Address _____

City _____ State _____ Zip _____

3) Billing Address (if different than above)

City _____ State _____ Zip _____

4) Business Phone: _____ Primary Contact Person: _____

5) Website: _____ Email address: _____

6) Date Business Started _____ Days & Hours of Operation: _____

7) Name of owner, partner, shareholder _____

Home address City State Zip

Name of owner, partner, shareholder

Home address City State Zip

8) Type of Business Sole Proprietorship Partnership L.L.C. Corporation

Date of Incorporation: _____ State Where Incorporated: _____

Federal ID Number: _____ (required if business is a partnership or corporation)

Or Owners Social Security Number: _____ (if sole proprietorship or partnership)

9) Please list 2 Suppliers:

Name _____ How Long _____

Name _____ How Long _____

10) How did you hear about us? _____

Signature _____ Date _____

Must be owner or corporate officer



Primary Market Segments

Please indicate the markets your business currently sells into with approximate percentages:

Automotive

Jeep _____ %
Raptor _____ %
F-250/350 _____ %
F-450/550 _____ %
Motorhome _____ %
Civic _____ %
Porsche _____ %
Toyota _____ %

Sport SXS

Can-Am _____ %
CFMoto _____ %
Honda _____ %
Kawasaki _____ %
Polaris _____ %
Yamaha _____ %

Utility SXS:

Can-Am _____ %
CFMoto _____ %
Honda _____ %
Kawasaki _____ %
Polaris _____ %
Yamaha _____ %

Motorcycle

Enduro : _____ %
Motocross : _____ %
Sports Bike : _____ %
Adventure : _____ %

Snowmobile

Polaris _____ %
Ski-Doo _____ %

Service Capabilities

Do you currently offer suspension service or rebuilds? Yes No

Do you have suspension technicians on staff? Yes No

Marketing Materials Support

- 4' x 2.5' Wall Display – E-CLIK
- 4' x 2.5' Wall Display – Terrain Master
- E-CLIK Interactive Display
- 4x2 Banner – Jeep
- 4x2 Banner – Raptor
- 4x2 Banner – UTV / SXS
- 4x2 Banner – Motorcycle
- 4x2 Banner – SDI Brand
- Trifold Counter Display Kit
- Showroom TV Video Content

Additional Comments

Please share any additional information about your dealership, customer base, or goals with SDI:

Please return the completed application to Suspension Direct Inc. via email at sales@suspensiondirect.com



Yearly Credit Card Authorization Form
Charges posted from 01/01/2026 to 12/31/2026

Please complete and sign this authorization form and return to Suspension Direct Inc.

Name
Company
Date

Card Details:

Card Number	
Expiration	CVV/CVC/CID

I, _____ give permission to Suspension Direct Inc to charge my card for the following purchases.
My card details will be stored in my profile and will only be used for approved purchases.

Would you like to be notified before every shipment? Yes No
(If Yes, This may delay your shipment.)

Billing Address

Street	
City	
State	Zip

Annual Credit Card Authorization form for orders/purchases shipped out from Suspension Direct Inc. I authorize Suspension Direct Inc. to charge my credit card provided above for all my 2026 purchases made with Suspension Direct Inc. I agree to pay for these purchases in accordance with the issuing bank cardholder agreement. Any transaction over \$10,000.00 in sales will also require a verbal phone authorization.

Signature	Date
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Please note your account information is securely encrypted through our Merchant Service Provider. We will securely save your information on file.

California Resale Certificate

I HEREBY CERTIFY:

1. I hold valid seller's permit number: _____

2. I am engaged in the business of selling the following type of tangible personal property:

3. This certificate is for the purchase from _____ of the item(s) I have listed in paragraph 5 below. [Vendor's name]

4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.

5. Description of property to be purchased for resale:

6. I have read and understand the following:

For Your Information: A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

NAME OF PURCHASER _____

SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZED REPRESENTATIVE _____



PRINTED NAME OF PERSON SIGNING _____ TITLE _____

ADDRESS OF PURCHASER _____

TELEPHONE NUMBER _____ DATE _____
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