

BAER
BRAKE SYSTEMS



AUTHORIZED RESELLER FORM

DATE: _____

BUSINESS NAME: _____

CONTACT NAME: _____

EMAIL: _____

STREET ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

COUNTRY: _____

BUSINESS TYPE: **ONLINE RETAILER** **BRICK & MORTAR** **INSTALLER**

(Check all that apply)

PHONE NUMBER: _____

FAX NUMBER: _____

PLEASE LIST ALL YOUR WEBSITES:

DOES YOUR COMPANY SPECIALIZE IN ANY SPECIFIC MAKES/MODELS? (List Make/Model Below)

NUMBER OF YEARS IN BUSINESS:

WHERE DO YOU **PURCHASE BAER PRODUCTS**?

If approved as an authorized reseller; BAER Brakes would like to email you product information updates and exclusive access to our Media/Data Center. This includes product images, pricing, ACES & PIES Data and press releases on new product applications. We promise no spam, your information will be kept private and will never be sold or shared with anyone! To receive these emails from BAER, please check this box: