

## Andretti Motorbikes + Your Dealership + CBS OUTDOOR = Winning Combination

Andretti Motorbikes is an Attractive Profit Center for Your Dealership. We are teaming up with CBS to launch an Advertising Campaign to promote Andretti Motorbikes. Contact us now for information on how you can become Andretti Authorized Dealer.

### No Purchase Required!

All-New, Unique & Profitable Powersports Business Opportunity.

WHY become Andretti Dealer?

1. Protected Territories: 15-20 miles
2. Super Return On Investment vs Standard Auto Sales
3. Scooters Sales doubled during last 2 years!
4. No Minimum Buys, No Franchise Fees, No Royalties.
5. The only Motorbikes Endorsed by Mario Andretti
6. 24/7 Road Assistance = More Safety With Zero Cost To Your Customer
7. Impressive Profit Margins: 35%
8. Retail Financing is Available.
9. Exclusive Designs: by BENELLI, ITALY (founded in 1911)
10. Competitive Pricing Structure: Save 30% vs Vespa, Yamaha or Honda.

Andretti Motorbikes by Power Sports Factory are in high demand. Hurry up and Reserve Your Exclusive Territory!

Fill out attached Dealer Application and fax to (856) 488-8077.

**Join ANDDRETTI's Team Today! Get In Now For  
the Profit Ride Of Your Life!**

Be the First In Your Area to sell our Top Rated Motorbikes & Rev-Up Your Sales!



Power Sports Factory | 6950 Central Highway | Pennsauken NJ |  
 856.488.9333 | [www.powersportsfactory.com](http://www.powersportsfactory.com)

## Dealer Application

1) Legal Company Name \_\_\_\_\_  
 DBA Name (if applicable) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Website Address \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_ Fax  
 (\_\_\_\_\_) \_\_\_\_\_

4) Date Business Started \_\_\_\_/\_\_\_\_/\_\_\_\_

5) \_\_\_\_\_  
 Name of Owner, Partner, Shareholder \_\_\_\_\_ Phone \_\_\_\_\_

Name of Owner, Partner, Shareholder \_\_\_\_\_ Phone \_\_\_\_\_

6) If more than one name is listed above, are you operating as:

Sole Proprietor  Partnership  Corporation

State, Where Incorporated \_\_\_\_\_

Federal Tax ID \_\_\_\_\_

Which of the following best describes your business? Check all that apply.

Franchise Motor Vehicle Dealer Number \_\_\_\_\_

Accessories  Repairs

Other, please describe \_\_\_\_\_

Brand(s) \_\_\_\_\_

7) Are you currently purchasing products from other manufacturers or distributors a similar product?

? No            ? Yes

If yes, please describe \_\_\_\_\_

8) Garage liability insurance:

Company Name \_\_\_\_\_

Policy Number \_\_\_\_\_

Amount of the aggregate garage liability insurance \_\_\_\_\_

Effective Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Insurance Company Telephone (\_\_\_\_) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Signatory must be an owner, partner, or corporate officer.*