



# L & O Manufacturing

## Becoming a Dealer Application:

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

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

Address: \_\_\_\_\_  
Street Address  
\_\_\_\_\_  
City State ZIP Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Are you currently a Rent to Own Dealer? YES NO

Do you use an Inventory Finance Company? YES NO  
  If yes, who? \_\_\_\_\_

### Detailed Business Information

How many locations do you have? \_\_\_\_\_

Why do you want to become a dealer? \_\_\_\_\_

What other products do you carry? \_\_\_\_\_

Estimated Annual % of trailers sales do you expect to be from L&O? \_\_\_\_\_

What manufacturer's products do you currently sell, if any: \_\_\_\_\_