



1300 East International Speedway Blvd
Deland, Florida 32724
Telephone: (386) 738-2224
Fax: (386) 734-8297
www.performancedesigns.com

**Parachute Equipment
Manufacturing, Sales, Service**

DEALERSHIP APPLICATION REQUEST

Thank you for your interest in Performance Designs. Our Dealer Application Process assures that new dealers meet our company's qualifications. The process usually takes between 60-90 days after receiving a completed application. Please fill out the information below completely and accurately so we can evaluate your request fairly.

By submitting this application, Applicant acknowledges and agrees the following:

- This application is submitted for review by Performance Designs, Inc, its offices and employees. In reviewing this application we may investigate and evaluate the credit worthiness, general reputation, character, background, and business experience of the applicant.
- This application does not bind applicant to accept, nor does it obligate Performance Designs, Inc in any way to offer a dealer agreement.
- Any material misrepresentation or omission, intentional or unintentional, in the information supplied by the applicant in connection with this application shall constitute grounds for immediate termination of any Dealer Agreement subsequently entered in to by the applicant and Performance Designs, Inc.
- Performance Designs, Inc requires a minimum quota of 20 canopies ordered per year to maintain a dealership. If you do not think that you can maintain that level of sales please ask us about sub-dealerships available through our present dealers.
- All dealerships are subject to yearly or periodic review and evaluation.

****PLEASE MAKE SURE THAT YOU FILL OUT THE FORM COMPLETELY AND CLEARLY. THIS IS OUR TOOL TO EVALUATE YOUR REQUEST. LACK OF INFORMATION OR FAILURE TO INCLUDE OR ADDRESS THE REQUIRED ATTACHMENTS WILL BE CONSIDERED GROUNDS FOR DISMISSAL****



GENERAL INFORMATION

Company Name: _____
Main Contact Person: _____ Position: _____
Other Contact Person: _____ Position: _____
Other Contact Person: _____ Position: _____
Billing Address: _____
Country: _____
Phone: _____ Fax: _____
E-mail: _____
Website: _____ Facebook: _____

SHIPPING

Shipping Address: _____
Is this a freight forwarder: _____
Preferred Shipping Company (FedEx, UPS): _____
Special Shipping Instructions: _____

BUSINESS LICENSES

** Please attach copies of each license**
US Business Tax ID #: _____
Florida Sales Tax # (if shipping address or pick up in Florida): _____
International Business License #: _____

PREFERRED METHOD OF PAYMENT

All new dealerships are required to prepay
_____ Company check (must be received before merchandise is shipped)
_____ Wire Transfer (Bank information will be provided)
_____ Bank Draft or Money Order (must be received before merchandise is shipped)
_____ Credit Card On Account (Amex, Visa and Master Card accepted)
-To be provided at a later date.

BUSINESS INFORMATION

Type of Business (please mark all that apply)
Gear store _____ Rigging Service _____ Online Store _____
Drop Zone _____ Manufacturer _____ Other: _____
(Please specify)



Performance Designs Dealer Request Continued

Percentage of total business done through DZ Gear store: _____ Online: _____ Other: _____
Percentage of canopy sales done through DZ Gear store: _____ Online: _____ Other: _____

Nearest large city and your proximity: _____

What Drop Zone/Drop Zones do you serve? _____

What type of aircraft do they utilize? _____

of jumps per year(last 3 years): _____

AFF graduates: _____

S/L: _____

TandemJumps: _____

Please describe your facilities (if possible also include pictures): _____

What services do you offer? _____

Hours of Operation: Weekdays _____ Weekends _____

Where are you located in relation to other dealers in your area? _____

COMPANY HISTORY

How long have you been in business? _____

Are you currently selling Performance Designs canopies? _____

If so, how many PD canopies do you sell per year? _____

Are you currently a sub-dealer for Performance Designs? _____

Who is your present dealer? _____

What other dealerships with manufacturers do you have now? _____

Canopy Sales:

Year to Date- Total: _____ PD: _____ Other: _____

Last year (12 months)-Total: _____ PD: _____ Other: _____

1 year ago (12 months)-Total: _____ PD: _____ Other: _____

2 years ago (12 months)-Total: _____ PD: _____ Other: _____

Have you ever been terminated as a dealer of any product? _____
If so, please explain _____

In the past, have you manufactured or sold skydiving equipment? What types? _____



Performance Designs Dealer Request Continued

How many PD canopies do you expect to sell on your first year?
Mains _____ Reserves _____

Are you aware that Performance Designs requires a minimum of 20 canopies ordered per year to maintain a dealership? _____

What are your goals as a Performance Designs, Inc dealer? _____

Do you have a business plan and strategy for the next 12-24 months? (Please explain and attach copy)

BUSINESS REFERENCES

Please list 3 business references of which you are currently doing business with. **BE SURE TO INCLUDE THEIR FULL ADDRESS, PHONE, FAX, AND E-MAIL ADDRESS.**

1. Name: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

2. Name: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

3. Name: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

DROP ZONE INFORMATION

If you serve more than one DZ please list the same information for all of them in a separate sheet

Affiliated Drop Zone (if you are not one): _____

DZ Phone: _____ Fax: _____

Contact Person: _____

E-mail: _____

Drop Zone Address: _____

How many students does your DZ cater during a year? _____

How many students are retained after student status? _____



Performance Designs Dealer Request Continued

Type of student and other training available at your Drop zone: _____

Do you have student gear available? _____
What models? _____

Do you have demo canopies available? _____
What models? _____

Is there a gear store on-site? If yes, please list: _____

Is there a rigging loft on-site? If yes, please list: _____

PERSONAL INFORMATION

Please tell us about your skydiving and business experience.

Total Jumps _____ Years in the sport _____
Skydiving Ratings & Licenses _____

Previous canopy experience (model and size): _____

Do you have any previous experience in the skydiving business? Please explain _____

Additional Comments: Please attach

ATTACHMENTS REQUIRED

Please remember that the more information we have about you and your business, the better we can evaluate your ability to meet our dealer qualifications

- Pictures of your facilities
- At least one letter of recommendation
- Strategic plan for 12-24 months or business plan
- History documenting sales to date as a subdealer(if applicable)
- Copy of your business license

Please be sure that you have completed all the information requested above. We will be happy to take your request into consideration. Please don't hesitate to contact us if you have any questions or if you require additional information. Once again, thank you for your interest in Performance Designs and we look forward to doing business with you in the future.

Performance Designs reviews dealer applications once per month. Your completed dealer application will be thoroughly reviewed on the next review date. Please be sure all the required attachments are included