



**Advanced Innovative Technology Corp.**

**TrakMotive**

350 Nevada St. Redlands, CA 92373

Phone: (800) 567-1608

Fax: (909) 793-1068

Website: [www.trakmotive.com](http://www.trakmotive.com)

Email: [dealers@trakmotive.com](mailto:dealers@trakmotive.com)

Welcome!

Thank you for your interest in becoming a TrakMotive dealer.

Advanced Innovative Technology Corp. (AIT), the parent company of the TrakMotive brand, was established in 2006 and specializes in new automotive, light duty truck, ATV, and UTV Constant Velocity (CV) Axles. Our state-of-the-art ISO9001 and TS16949 certified manufacturing facility ensures all products are designed and developed by top engineers and produced by certified technicians to the highest quality standards for today's demanding global market.

We are a world leading Original Equipment Manufacturer (OEM) for numerous companies. Our replacement axle program is currently the most sought after in the North American automotive aftermarket, and is sold by the industry's largest distributors and retailers. We are now bringing that technology to the Powersports industry.

With a 65,000 sq. ft. warehouse in Springfield, MO and another 65,000 sq. ft. warehouse in Redlands, CA, you can have the confidence of knowing our two massive distribution centers will have the parts you need in stock and ready to ship when you need them, as well as the customer service and technical support you can count on to handle all your requests and questions.

**To become a TrakMotive dealer, please complete the enclosed application and provide the following required documentation:**

- Completed Dealer Application
- Completed Credit Card Authorization or Credit Application for Open Account
- Completed Blanket Resale Certificate
- Photocopy of State Tax Resale Certificate (if applicable)

**Please fax to 909-793-1068 or scan all documents and email in PDF format to [dealers@trakmotive.com](mailto:dealers@trakmotive.com).**

## Dealer Policies

**General Policy:** We only sell to legitimate Automotive and Powersports businesses (serving the public in areas of sales, service and/or parts and accessories). We will only process applications for dealers that are in the Automotive and Powersports industries.

**Payment:** All customers will receive orders on a credit card basis except those who have established an open account with us. Upon approval of credit, customers with an open account receive our standard credit terms of Net 30 Days. Any unpaid or past due invoices will be subject to further collection from Advanced Innovative Technology Corp.'s attorney or collection agency. Customer will be responsible for all collection and/or legal fees.

**Shipping:** We offer free shipping on orders totaling \$100 or more in qualified product shipping within the continental United States, and reserve the right to choose the method of shipping. Orders that do not qualify for free shipping will be shipped by the most reasonable means according to the size and weight of the order, unless otherwise specified. TrakMotive will make every effort to ship orders placed before 2:00PM (CST) the same day.

**Drop Shipments:** Dealers may drop ship orders directly to their customers for a \$2.00 drop ship fee per order. Drop ship orders do not qualify for free shipping.

**Initial / Minimum Orders:** There is no initial or minimum order requirement.

**Backorders:** We do not hold backorders. We strive to always have stock of every part number.

**Returns:** All sales are final except for defects in manufacturing. Returned merchandise must be accompanied by an RMA# obtained through the Returns Department by emailing [returns@trakmotive.com](mailto:returns@trakmotive.com), or merchandise will be refused and returned to the customer. All returns are subject to inspection for determination of credit. Shortages, overages, and discrepancies must be reported within 10 days of the invoice date.

**Ordering / Customer Service:** The Call Center is available from 7:00AM to 3:30PM (PST) at 800-567-1608.

**Technical Support:** The Tech Department is available from 7:00AM to 3:30PM (PST) at 855-831-9444.

**Prices:** All prices are subject to change without notice and will be billed at the current price at the time of shipment.

**Catalog Contents:** The information listed in the catalog is correct to the best of our knowledge, and we assume no responsibility or liability for errors contained within. We do greatly appreciate being advised of any inaccuracies that may come to your attention. The catalog department can be reached at 417-831-1804.



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Dealer Application

Advanced Innovative Technology Corp. (TrakMotive) is a wholesale distributor that only sells to approved retailers. To protect our dealers, it is necessary to review each new application. To process your dealer application as quickly as possible, please completely fill out all of the following information and include all necessary documentation. Incomplete, illegible, or missing required information will delay set-up.

Legal Firm Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Shipping Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website: \_\_\_\_\_

Facebook Page: \_\_\_\_\_ Year Established: \_\_\_\_\_ Years In Business At This Address: \_\_\_\_\_

Federal Tax ID#: \_\_\_\_\_ State & Resale Tax#: \_\_\_\_\_

Business Entity:  Sole Proprietorship  Partnership  Corporation  Other: \_\_\_\_\_

Business Type:  Franchise  Independent  Ecommerce  Other: \_\_\_\_\_

If franchise, please list brands carried: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Owner's Email: \_\_\_\_\_

Parts Manager: \_\_\_\_\_ Parts Manager Email: \_\_\_\_\_

Authorized Buyers:  Any employee  Only the following employees: \_\_\_\_\_

Industry Trade References:

1. Company Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

2. Company Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

3. Company Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Payment Method:  Credit Card (complete Credit Card Authorization)  Open Account (complete Credit Application)

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

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

By signing this form, you confirm the information provided is accurate and complete to the best of your knowledge and understand that Advanced Innovative Technology Corp. reserves the right to deny this application.



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### Credit Card Authorization

Legal Firm Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Accounts Payable Email: \_\_\_\_\_

Accounts Payable Phone: \_\_\_\_\_ Accounts Payable Fax: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_  VISA  MASTERCARD

Expiration Date: \_\_\_\_\_ CVV (3 or 4 Digits): \_\_\_\_\_  AMEX  DISCOVER

C/C Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Terms and Conditions

I declare that the information provided above is accurate, and that I am authorized by my company to execute any Credit Card Authorization. I authorize Advanced Innovative Technology Corp. to use the credit card listed above to pay for any products, services, past due balances, and related fees. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company.

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

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

***By signing this form, you confirm that you have read, understand and agree with all terms and conditions.***



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**Credit Application for Open Account**

Legal Firm Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Accounts Payable Email: \_\_\_\_\_

Accounts Payable Phone: \_\_\_\_\_ Accounts Payable Fax: \_\_\_\_\_

D&B#: \_\_\_\_\_ Estimated Annual Sales: \_\_\_\_\_ Credit Line Request: \_\_\_\_\_

Federal Tax ID#: \_\_\_\_\_ State & Resale Tax#: \_\_\_\_\_

Business Entity:  Sole Proprietorship  Partnership  Corporation  Other: \_\_\_\_\_

Business Type: \_\_\_\_\_ Year Established: \_\_\_\_\_ Years In Business At This Address: \_\_\_\_\_

**Bank Information:**

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account Number: \_\_\_\_\_ Bank Phone: \_\_\_\_\_ Bank Fax: \_\_\_\_\_

**Industry Trade References:**

1. Company Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

2. Company Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

3. Company Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

***For Internal Office Use Only***

Credit Line: \_\_\_\_\_ Terms: \_\_\_\_\_ Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

**Terms and Conditions**

I declare that the information provided above is accurate, and that I am authorized by my company to execute this credit application. I hereby authorize the release of Customer's credit status for the purpose of obtaining credit approval with Advanced Innovative Technology Corp., and it has Customer's permission to verify all the information stated above. Customer agrees to Advanced Innovative Technology' Corp.'s standard credit terms of Net 30 Days upon approval of credit. Customer agrees that any unpaid or past due invoices will be subject to collection by an attorney or collection agency. **Customer will be responsible for all costs of collection including, but not limited to reasonable attorney fees. In the event it becomes necessary for Advanced Innovative Technology Corp. to institute litigation to collect any past due amounts, Customer agrees to be responsible for all court costs and legal fees incurred by AIT, and consents to personal jurisdiction in the State of Missouri. Customer agrees the venue for any such legal action shall be in the Circuit Court of Greene County Missouri.**

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

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**By signing this form, you confirm that you have read, understand and agree with all terms and conditions.**



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### **Blanket Resale Certificate**

This is to certify that all material, merchandise, or goods purchased by the undersigned from Advanced Innovative Technology Corp. are intended for resale as tangible personal property, or for use or incorporation as a material or part of other tangible personal property to be produced for sale by manufacturing, assembling, processing, or refining, in the regular course of business and are exempt from applicable state sales and use tax.

Purchaser understands that if any of the items purchased under this blanket resale certificate are used or consumed in any manner other than described above, the Purchaser will owe use tax based on each item's purchase price or as otherwise provided by law.

This blanket resale certificate shall be considered a part of each order given to Advanced Innovative Technology Corp., unless the order otherwise specifies, and is to continue in force until revoked.

Legal Firm Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Seller's Permit / Registration #: \_\_\_\_\_ State of Registration: \_\_\_\_\_

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

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

***By signing this form, you confirm that the information provided is accurate and complete as to every material matter.***