



Vehicle Wash Systems

1698 Scheuring Road
De Pere, WI 54115
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www.pdqinc.com

Distributor Application

<i>Company Contact:</i>				
Name _____	Company _____	Title _____		
Address / City / State / Zip _____				Date _____
Office Phone _____	Cell Phone _____	Fax _____	E-mail Address _____	

<i>Staffing:</i>
Check one: <input type="checkbox"/> CORP <input type="checkbox"/> Partnership <input type="checkbox"/> Individual Years in Business _____
Principal _____ Title _____
Principal _____ Title _____
Principal _____ Title _____
Total # of Employees _____
Service Employees _____ Support Office Staff _____ Dedicated Equipment Sales Staff _____

<i>Current Business:</i>
Current Car Wash Equipment Lines (please list all that apply):
Self Serve _____ # of Units Sold _____
In-bay Automatic _____ # of Units Sold _____
Tunnel _____ # of Units Sold _____
Entry Station _____ # of Units Sold _____
Territory(s) Currently Covered (states) _____
Projected Annual Volume for PDQ Equipment – # of Units _____ \$ _____ Parts _____
Lines Desired: <input type="checkbox"/> PDQ Touch Free IBA <input type="checkbox"/> PDQ Tunnel <input type="checkbox"/> PDQ Tunnel and IBA <input type="checkbox"/> PDQ Entry Stations

<i>References:</i>
Vendor References: Name / Address / City / State / Zip / Phone
1. _____
2. _____
3. _____
Customer References: Name / Address / City / State / Zip / Phone
1. _____
2. _____
3. _____
Dun & Bradstreet Listed _____ Rated _____

*** * Important: Please attach your sales tax exemption certificate and Federal ID#. * ***