

Signature

DEALER INFORMATION CHANGE REQUEST FORM

Please return this form via e-mail to your assigned Inside Sales Representative:			
	Ticuse return tills for		Side Jules Representative.
BILLING/I	MAILING INFORMATIO	N (See *A below):	GENERAC USE ONLY:
	Address:		Payer:
	City/State/Zip:		WF Payer:
	Phone:		Bill-to:
	Fax:		WF Bill-to:
	Tax ID #:		Vendor:
E-	Invoice E-Mail:		
PHYSICAL	FACILITY LOCATION (Can not be a PO Box)	GENERAC USE ONLY:
	Address:		Sold-to:
	City/State/Zip:		Vendor:
	Phone:		
Drimor	Fax:		
Primary a	account E-Mail:		1
	SHIPPING INFORMATION	ON (See *B):	GENERAC USE ONLY:
E	Business Name:		Ship-to:
	Address:		Drop Ship:
	City/State/Zip:		(Drop ship partner should only update phone number, no other information to be updated
	Phone:		
		N (on www.generac.com):	
Business I	Name (See *C):		GENERAC USE ONLY:
	Address:		Partner:
City/State/Zip:			Partner:
	Phone: Fax:		
1	ink to website:		
	on E-Mail (*D):		
			•
		ith this form for any service dealer changing billi	ng information. New W-9 submitted must have
· ·	number as is currently on file with		
	· · · · · · · · · · · · · · · · · · ·	does not change shipping address allowed for o	= = = = = = = = = = = = = = = = = = = =
		to before any change can be made to shipping a n what is on the dealer's Buy/Sell Agreement in	ddress for orders placed on Wells Fargo financing.
		n what is on the dealer's Buy/sell Agreement in f registration with home state along with this fol	, ,,
	•	PowerPlay leads. The e-mail address used for no	
		tion web portal. ("SALES" > "POWERPLAY" > "DE	
KEY CON	·	s used by Marketing for notification E-mail Address	-
1>	Name	L-IIIaii Address	Function
2>			
3>			
4>			
5>			
65			
6>			

Print name/Title

Date