

**Edelbrock E-Force Installer
Qualification Form**

Dear Valued Customer,

Thank you for your interest in becoming an Edelbrock E-Force Installer. We receive customer inquiries on a daily basis seeking out a reputable service facility to install/tune E-Force superchargers.

This form is designed to help efficiently determine if an installer qualifies to be added into our website's extensive certified installer dealer locator. Additionally, your business could be included in Edelbrock advertising and literature. Becoming Edelbrock E-Force Installer could substantially increase your customer traffic and sales of E-force kits and service.

We do require the following information to assess your business eligibility. Once your completed application is received, Edelbrock will have a regional sales representative contact you to discuss the next step in becoming an E-Force Installer.

Business Name: _____ **Owner/President:** _____
Street Address: _____
City: _____ **State:** _____ **Zip:** _____
Business Phone: _____ **Business Fax:** _____
Email Address: _____ **Company Website:** _____
Federal Tax ID # and/or Business License: _____ **Business Hours:** _____

Services Offered (Check all that may apply)

Supercharger Installer EFI Installer EFI Tuner (Software)
If EFI Tuner is not checked, do you collaborate with an affiliate EFI tuner? Yes No
If yes, please provide the following: **Business Name:** _____
Contact: _____ **Phone:** _____ **Website:** _____
Chassis Dyno (make/model) _____ **Engine Dyno** (make/model) _____
 Engine Builder Engine Removal and Installation Exhaust Suspension
 Custom Plumbing Nitrous Install/Tuning Body Work Data Acquisition
Other: _____

Relevant competitor(s) products that you install: _____

Where do you source Edelbrock parts from: Direct Wholesale Distributor: _____

Installer Info:

<u>Installer Name(s)</u>	<u>Years of experience</u>
_____	_____
_____	_____
_____	_____

Installer Certifications (Check all that apply)

Certified OE technician: GM Ford Chrysler Other: _____
Certified by the Institute for Automotive Service Excellence (ASE): _____
Other Qualification(s), training, certificates: _____

Please provide photos of the following:

**Storefront
Shop and Installation
facility Dyno facility (If applicable)**

- Return completed form and images to ceidem@edelbrock.com (or) fax to (310) 320-1187 ATTN: Christopher Eidem

Applicant Name

Applicant Signature

Phone Number

Date