



Authorized Service Center Application Sanborn Mfg. Air Compressors METL Outdoor Power Equipment
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(Please Type or Print Clearly)

Date: _____

Company Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

General Manager or Owner: _____

Service Manager: _____

Number of Service Mechanics: _____

Total Number Years of Service Background: _____

Years in Business: _____

Primary Business Is: _____

Major Product Lines Sold: _____

Product lines interested in servicing: ___ Air Compressors ___ Outdoor Power Equipment ___ Pressure Washers

I am an Authorized Service Center for these Manufacturers: _____

Do You Have 24 Hour Service? _____ 800 Number, if offered: _____

Do You Make Field Service Calls? _____

Do You Have Field Service Trucks or Vans? _____ How Many? _____

Other Service Locations: _____

Located Where: _____

Type of Service Center Classification Requested: Service Center Service Dealer

Posted Shop Rate: _____

Your Comments: _____

Submitted By: _____

Title: _____

SEND TO: Service Center Administrator
 Sanborn Mfg., A Division of MAT Industries, LLC
 118 W. Rock St.
 Springfield, MN 56087
 Fax: 507-723-5013
 (Processing Will Begin When Received.)