Approved Dealer Tool and Equipment Program

Fax order form to (800) 892-9651

or Call (888) 542-1011

Order / Fax Form

Dealer Number | | | | | | |

Date: _____

Bill To:

Name: _____

Address: _____

Address 2: _____

City/State/Postal Code: _____

Attention: _____

Purchase Order Number: _____

Phone Number: _____

Fax Number: _____

Ship To: (if same as 'Bill To', enter 'SAME' on next line)

Name: _____

Address: _____

Address 2: _____

City/State/Postal Code: _____

Attention: _____

Telephone Number: _____

Payment Options (check one)

Required to process order*

☐ Bill to parts account.

☐ Lease through Snap-on Business Solutions ($5000 min) or a leasing company of your choice (must fill out required credit application).

☐ Bill direct to dealership, Net 30.

Dealers should ensure that the necessary unloading devices (fork lift, tow truck, etc.) are available when the equipment is delivered.

Please be advised that Kia Motors America, Inc. makes no expressed warranties or implied warranties of fitness for a particular purpose or merchantability on this equipment. Only warranty is that which is supplied by the manufacturer.

Qty.	Item Number	Description	Price (USD)	Extended Amount

Subtotal

***Estimated Freight**

***Estimated Installation**

***Taxes**

TOTAL

***Freight and installation charges plus any applicable taxes, when not included in the purchase price, will be added to the equipment price and included as part of the amount charged.**

X _____

Authorized Signature **Date**

(SIGNATURE REQUIRED TO PROCESS ORDER)

☐ **Service Manager** ☐ **Parts Manager** ☐ **Owner** ☐ **Other** _____

X _____

Seller Signature **Date**

For SBS Use Only **Date**

06/2015