

REGISTRATION-WARRANTY CARD

IMPORTANT: You Must Complete Both Sides and Return within 15 Days of Purchase to Validate Your Warranty.

Name: _____
Address: _____
City: _____
State: _____ Country: _____ Zip: _____
Phone: (H) _____ (W) _____
E-Mail: _____
Purchase Date: _____
Purchased From: _____
Product: _____ VIN Number: _____
Age: _____ Sex: _____ Occupation: _____

* Is this your first Electric Vehicle? Yes No

* I use my ZAP for (circle all that apply):
Commuting Recreation Work Fun Shopping Exercise

* I use my vehicle for _____ miles per day.

* I purchased my ZAP because of:

<input type="checkbox"/> The Environment	<input type="checkbox"/> Global Warming
<input type="checkbox"/> Saving Money	<input type="checkbox"/> Being Unique
<input type="checkbox"/> It's Fun	<input type="checkbox"/> It's the Future
<input type="checkbox"/> Low Maintenance	<input type="checkbox"/> I Hate Gas
<input type="checkbox"/> Governmental Mandate	

Other _____

* Are you interested in becoming a ZAP Dealer?
 Yes No

* Are you interested in helping sell ZAP Products?
 Yes No

* Are you interested in:
 Marketing/Sales *Public Relations*
 Shareholder Info (ZAP is publicly traded, Stock Symbol: ZAAP)

* Favorite Magazines:

1. _____
2. _____
3. _____

Comments: _____

THANK YOU!
See us at our Web Site!
WWW.ZAPWORLD.COM



FROM :

PLACE FIRST
CLASS
POSTAGE
HERE

ZAP
501 Fourth Street
Santa Rosa ⚡ California 95401 USA
ATTN: Warranty Department