

**Rupp Marine Inc.**

P.O. Drawer F
Port Salerno, FL 34992

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(772) 288-4180 fax

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RUPP CUSTOMER INFORMATION FORM

CONFIDENTIAL

**TO BE COMPLETED BY ALL COMPANIES
DESIRING TO PURCHASE OR RESELL RUPP PRODUCTS**

Name of Business:		(DBA) Doing Business As:	
Business Address:	City	State	Zip
Mailing Address:	City	State	Zip
How Long In Business:	Phone #	Fax #	

Type of Business: Service Yard, Boat Dealer, Boat Builder, Electronics, Exporter, etc (be specific):			
Our Business Is a: (circle one) Single Proprietorship Limited Partnership Partnership Corporation			
State of Incorporation:	Year of Incorporation:	Primary Contact:	
Tax ID #	Website Address:	email:	

Principal Owners, Partners or Officers are:			
Name:	Title:		
Address:	City:	State:	Zip
Name:	Title:		
Address:	City:	State:	Zip
Name:	Title:		
Address:	City:	State:	Zip

Dealer Questionnaire (OEM'S DISREGARD):	
Which (if any) boat shows do you exhibit at:	Do you currently have outrigger Installation services:
Do you have an online store:	If yes, do you offer these services to general public:
If yes, do you plan to sell Rupp products online:	What Rupp product categories are you most interest in (circle all applicable)
Do you have a retail store:	RuppRiggers TopGuns Antenna PowerRiggers
If yes, do you desire POP material for your store:	Rod Holders/Hangers Accessories/Rigging

Are P.O's Required (circle one):	Yes	No
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Credit Card Information: (credit terms are available for those with established Rupp purchase history)	
Circle One: VISA MasterCard Amex	Name on Card:
Card #:	Business Name (if applicable):
Expiration date:	Billing address (if different from above):
CVS will be required at time of ordering (do not include here)	Shipping address (if different from above):
Card Holder Signature:	

Business License: (Please attach a copy of your license)	
City, County and State:	Business License Number:

****FLORIDA CUSTOMERS: PLEASE SUPPLY 'CURRENT YEAR' RESALE CERTIFICATE****

<i>This Section for Internal Use:</i>	<i>Dealer Type:</i>	<i>Dealer Fees Applied to First Order:</i>	<i>First Order Value:</i>
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