



Company Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Trade Name / DBA: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Shipping Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: ( ) - \_\_\_\_\_ Fax: ( ) - \_\_\_\_\_  
 Email: \_\_\_\_\_ Web site: \_\_\_\_\_  
 Owner/Principal: \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_  
 Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Description of Business: \_\_\_\_\_ Date Established: \_\_\_\_\_ # of Employees: \_\_\_\_\_  
 Are you a mobile or home based business?  Yes  No  
 Type of Merchandise to be purchased: \_\_\_\_\_ Brands of Boats in Stock: \_\_\_\_\_  
 Annual Gross Sales: \$ \_\_\_\_\_ Projected Monthly Purchases: \_\_\_\_\_  
 Should your account be:  taxable or  non taxable  
 Print names of up to 3 full time employees authorized to purchase on this account:  
 Buyers : 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Key Marine Suppliers:** (Please list other marine distributors/manufactures with whom you have a wholesale account)

Company Name	Phone#	Fax#	COD or Open Terms
1. _____	( ) - _____	( ) - _____	_____
2. _____	( ) - _____	( ) - _____	_____

Payment type requested:  Credit Card  COD\*  Open Terms\* PO Required?  Yes  No

**\*For consideration of open terms or COD please complete the following information:**

Incorporated  Sole Proprietorship  Partnership  LLC  
 Fed ID# or Tax ID#: \_\_\_\_\_ Duns#: \_\_\_\_\_  
 Accounts Payable Manager: \_\_\_\_\_ A/P email: \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_

**Credit References:**

Company Name	Phone#	Fax#	COD or Open Terms
1. _____	( ) - _____	( ) - _____	_____
2. _____	( ) - _____	( ) - _____	_____

**Bank Reference:**

Bank Name: \_\_\_\_\_ Account#: \_\_\_\_\_  
 Average Balance: \$ \_\_\_\_\_ Phone#: ( ) - \_\_\_\_\_ Contact: \_\_\_\_\_

**Signature required on all applications**

I certify that all statements are true and complete and authorize any wholesale, commercial, or if a proprietorship, business or personal credit investigation needed for verification. I hereby agree to seller's terms and conditions of sale as documented by the seller and agree to make all payments due. I further agree to pay any and all collection costs and/or attorney's fees involved in the collection of these debts. In addition I agree to pay 1.5 percent monthly late charges on any due and unpaid balances. Title to all purchases vests in the seller until paid in full by purchaser.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Owner/Principal, Partner, or Corporate officer)

**The following MUST be included with your application:**

- 1) copy of your business license 2) copy of marine advertising 3) state resale certificate for tax exemption

**Completing an application does not guarantee an account with Port Supply**

**Personal Guarantee – Please complete and sign if requesting open terms.**

I, \_\_\_\_\_, residing at \_\_\_\_\_  
 (print guarantor's name) (guarantor's home address)

for good and valuable consideration, including the extension of credit to the company or companies listed on this application from which I will benefit do hereby personally guarantee and promise to pay on demand any obligation of Customer to Port Supply without regard for any claim of setoff, counterclaim or defense. I hereby waive notice of sales to Customer, and of the terms thereof, and of non-payment or other default or dispute with Customer. I hereby waive any right to a jury trial and consent to all renewals and modifications of terms of sale or credit. This is a continuing and irrevocable guarantee and I hereby subordinate any indebtedness of Customer to me to that of Customer to Port Supply.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Phone #: ( ) - \_\_\_\_\_

**For Port Supply Use Only**

O	D	By	Date	MKT#	Sls#	Zone	Cgry	WHS	Ship Via	Frt AI	PRB	Cards	PTL	Cat	Account #