

DEALER APPLICATION – UNITED STATES

GENERAL INFORMATION

Legal Company Name				
Trade Name				
Address				
City		State	Zip Code	
Phone ()		Fax ()		
Email				
If affiliate/subsidiary, indicate parent company _				
Accounts Payable Contact				
Address				
City		State	Zip Code	
Phone ()		Fax ()		
Email				
Requested Credit Limit		PO Number Required	? Yes	No
COMPANY TYPE				
Sole Proprietor Partnership	Corporation			
BUSINESS TYPE				
☐ Retailer ☐ VAR ☐ Manufacturer	Distributor	☐ National Chain	Shipyard	System Integrator
Years in Business Annual Sales Volume		Business Registration Number		
Number of Locations State		Tax Number		
Square Footage Number of Emp	loyees			
CONTACT DETAILS				
Sales Contact	Email		Phone	
Accounts Contact	Email		Phone	
SHIPPING DETAILS				
Preferred Shipping Company		Shipping Account Number (optional)		
Preferred Customs Broker		Customs Contact (optional)		



TRUSTED EVERYWHERE.

I/we consent to the obtaining of bank/credit and/or personal information as may be required at any time in connection with the credit hereby applied for or renewal or extension thereof and to the disclosure of the credit information concerning me/us and/or my/our company to any credit reporting agency or to any person with the undersigned who has or purports to have financial relations. I/we further agree to indemnify MarineNav Ltd from all claims, which may arise because MarineNav Ltd disclosed information about myself/us and/or my/our company.

I/we further acknowledge having been informed of the Terms and Conditions of Sales as well as the prevailing terms for repayment and agree to pay a service charge, currently 1.5% per month compounded monthly (18% per annum) on any overdue balance until paid. In the event that any action or suit is instituted to collect amount due on our accounts, I/we agree to pay all legal and collection fees in addition to the amount owed plus interest charges.

I/we further acknowledge that MarineNav Ltd reserves the sole discretion and right to decline, change or revoke my/our payment terms at any time on the basis of my/our payment record and/or financial situation, and/or changes to MarineNav Ltd's credit policy.

I/we further acknowledge that payments returned by my/our financial institution for reasons not limited to non-sufficient funds will be subject to an administration fee of \$50.00 the said amount may be increased without prior notice.

I/we further acknowledge that "Title of Goods" remains with MarineNav Ltd even though goods may be in transit and/or on customer's premises (in case of resale), until payment has been received in full. Furthermore, I/we understand that all products are shipped without insurance, unless otherwise specified and shipping losses and damage are my/our responsibility.

I/we agree to inform MarineNav Ltd in writing of any changes in the legal name and form of the company. Failure to do so will permit MarineNav Ltd to continue to deal with the undersigned in the form as noted on this application, or with the new entity said which accepts all conditions herein above mentioned.

I/We have read and agreed to abide by MarineNav Ltd current terms & conditions of sale.

I/we hereby certify that the information contained in this application is true and correct.

Authorized Signature	Title
Name (Please Print)	Date
Please complete this dealer application form in full and have it signed	d by authorized personnel of your company.

Please fax completed form to (902) 838-2833