

TRIDENT DIVING EQUIPMENT

APPLICATION FOR DEALERSHIP

New Account _____

Re-open Account _____

Credit Ap _____

e-Mail to: Trident@TridentDive.com

STORE SHIP TO INFORMATION

ACCT # _____

STORE NAME _____

ADDRESS _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

POSTAL CODE _____ COUNTRY _____

PHONE # _____ FAX _____

EMAIL ADDRESS; _____

CREDIT CARD, EX DATE, _____ SECURITY CODE _____

SOLE PROPRIETOR ___ LLC ___ CORPORATION ___ PARTNERSHIP ___ OTHER _____

BILL TO INFORMATION

BILLING ADDRESS _____

PERSONAL INFORMATION

OWNERS NAME _____

PHONE # _____ S.S. # _____ DL# _____

OUTLET INFORMATION

RETAIL DIVE STORE WITH SIGNAGE ___ HOME PROPERTY STORE ___ RESORT SALES ___ CHARTER BOAT ___

OTHER TYPE OF FACILITY (DESCRIBE) _____

CERTIFICATION AGENCY PADI ___ NAUI ___ SSI ___ OTHER _____

AIR FILLS ___ INSTRUCTION ___ SERVICE ___ CLASSES ___ INTERNET SALES _____

CURRENT DIVE EQUIPMENT SUPPLIERS

COMPANY _____ TERMS _____

COMPANY _____ TERMS _____

COMPANY _____ TERMS _____

STATEMENT OF FACTS

I hereby state that all of the information I have provided above is true and correct to the best of my knowledge, and I authorize TRIDENT to check references I have provided and also my bank, for the purpose of extending me and / or my firm credit.

SIGNATURE _____ DATE _____ PRINT NAME _____

PERSONAL GUARANTEE

In the event this account is delinquent and satisfactory arrangements have not been made for payment, all legal, attorney fees, and collection costs will be assumed by debtor. By applying for credit, being accepted, and signing this application, I agree to the above terms and conditions. I also assume personal responsibility for payment for said corporation's account / and or the above named business's account. It is understood that credit would not be extended to said corporation without this assumption of liability, this guarantee and every part hereof shall extend to and be obligatory to my heirs, executors, administrators, and assigns and shall inure to the benefit of TRIDENT DIVING EQUIPMENT, their successors and assigns.

DATE _____ SIGNATURE _____

Reprint email address; _____