

# DATADOT SUPPLY ORDER FORM



Date: \_\_\_\_\_

Dealership Name: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ PO # \_\_\_\_\_ **\*\* (REQUIRED) \*\***

**Shipping Method: All orders will ship "Ground" unless otherwise specified.  
SHIPPER AND ACCOUNT NUMBER IS REQUIRED FOR ALL SHIPPING OTHER THAN GROUND**

**SHIPPER** \_\_\_\_\_ **ACCOUNT NUMBER** \_\_\_\_\_

Overnight  Second Day

## Installation Materials

Kick-Off Kits n/c \_\_\_\_\_ (For new accounts ONLY)

(1 scopes, package of policies, package of brochures, package of dry dots, Auto Kit Application Guide,  
1 sample Auto Kits for F&I office marking, 1 DataDot Technology- Ultimate Theft Protection System,  
1 Law Enforcement Guides, 2 Desk Blotters, 25 Rearview Mirror Hangers)

Desk Blotters - n/c \_\_\_\_\_ Dry Dot Packs – n/c \_\_\_\_\_

Rearview Mirror Hangers – n/c \_\_\_\_\_ Brochures – n/c. \_\_\_\_\_

Scopes \_\_\_\_\_

**Forms**  3yr/ \$2500 policies \_\_\_\_\_  3yr/ \$5000 policies \_\_\_\_\_  
 5yr/ \$2500 policies \_\_\_\_\_  5yr/ \$5000 policies \_\_\_\_\_  
 Registration only forms \_\_\_\_\_  Remittance forms \_\_\_\_\_

**Dots**  Auto Dot Kits: # \_\_\_\_\_ (minimum order - 100 kits per case)

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Email (please add Accounts Payable Email for billing purposes)  
\_\_\_\_\_

The Dealer requests the supply of the above quantity of DataDot kits. The Dealer agrees to pay for the order of kits within 30 days of invoice by DataDot Dealer Services.

Authorized Dealer Signature \_\_\_\_\_

Please fax this form to **888-415-5558** to facilitate on-line ordering access.

DataDot Dealer Services  
Address: 5605 77 Center Drive Suite 270  
Charlotte, NC 28217  
Ph: 800-710-8155