

A.R.A. GPS Systems, Inc. www.aragps.com

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NEW CUSTOMER PROFILE

Company Profile:

Note: Account Number will be assigned

Corp Name _____	Account # _____
D/B/A _____	Email _____
Web Site _____	_____

Billing Address:

Address _____	POB # _____
City _____	POB Zip _____
State _____	Phone _____
Zip _____	Fax _____

Shipping Address: if different from Billing Address

Street _____	
City _____	
State _____	Can Not Ship to Post Office Boxes
Zip _____	

User Profile: (System Administrator) & Contact Information

First Name _____	Last Name _____
Email _____	Title _____
Phone _____	Cell _____
Fax _____	

Login & Password: (case sensitive)

Desired _____	Desired _____
Username _____ <small>Must be minimum 8 characters & numbers</small>	Password _____ <small>Must be minimum 8 characters & numbers</small>

Financially Responsible Person:

First Name _____	Title _____
Last Name _____	Owner/Partner/Etc. _____
Phone _____	Cell _____
Fax _____	Email _____

Sales Agent _____	Set-Up Date _____
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