



**ROBINSON ARMAMENT CO.**  
**FIREARMS DEALER INFORMATION FORM**  
 EMAIL: ZDF@ROBARM.COM  
 PHONE: 801-355-0401  
 FAX: 801-355-0402  
 WEBSITE: WWW.ROBARM.COM  
 22-Feb-08

<b>Marketing Information</b>	
How did you find out about us?	
<b>Dealer Information</b>	
Dealer Name	
Dealer Trade Name (If any)	
Type of Entity (E.g. Corp, LLC, Sole Proprietor)	
Federal Firearm License Number	
SOT EIN (if any, for NFA Transfers)	
Years in Business	
Do you have a Storefront?	
Are you a stocking dealer?	
What is your website?	
<b>Person(s) Authorized to Order</b>	
First Name, Last Name, Postion	
First Name, Last Name, Postion	
<b>Contact Methods</b>	
Email (Preferred)	
Phone	
Fax	
Cell	
<b>Shipping Address</b>	
Street Address	
City	
State	
ZIP	
<b>Billing Address</b>	
Street Address	
City	
State	
ZIP	
<b>Documents Needed from You</b>	
Federal Firearms License Signed	
SOT EIN (if any, for NFA Transfers)	
State Sales Tax Exemption Cert.	
Signed Dealer Agreement	

By signing you represent and warrant that the information above is true and correct and that you are authorized by the Dealer (entity) to place orders.

Signed,

By: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_