



**CAPTAIN'S  
ORDERS INC.**

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PHONE  
219-531-2278  
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219-531-2998

**2058 Joliet Rd. Valparaiso, IN 46385**

Customer Information	
Boat Owner's Name	
Home Address	
City State Zip	
Day Phone	
Evening Phone	
PLEASE Complete If Boat Is Owned In PARTNERSHIP Name Address City State Zip & Phone	
MasterCard or Visa?	
Credit Card Number	
Credit Card Expiration Date	
(last 3 digits on back) V-Code	
Boat Information	
Boat Make	
Boat Model	
Boat Year	
Boat Name	
Launch Date/Haul Date Location/Marina	
Will We Need Keys? If So Where Are They?	
(Check all that apply) Sign Me Up For The Following	
REMOVE SHRINKWRAP <input type="checkbox"/>	DEWINTERIZE <input type="checkbox"/>
INSTALL BATTERIES (Cap Ord Has My Batts) <input type="checkbox"/>	TUNE UP <input type="checkbox"/>
RECONNECT BATTERIES <input type="checkbox"/>	DRIVE SERVICE (I/O) <input type="checkbox"/>
PRESSURE WASH BOTTOM <input type="checkbox"/>	CHANGE IMPELLER <input type="checkbox"/>
ACID WASH BOTTOM <input type="checkbox"/>	CHANGE OIL & FILTERS <input type="checkbox"/>
ACID WASH DRIVES <input type="checkbox"/>	SEND IN PROP FOR PROP SCAN/REPAIR <input type="checkbox"/>
BOTTOM PAINT-(CURRENT COLOR IS:) <input type="checkbox"/>	HAULTO/FROM CAP ORD TO RAMP <input type="checkbox"/>
<input type="checkbox"/>	Describe miscellaneous work not listed here <input type="checkbox"/>
<input type="checkbox"/>	in the space below (use other side if needed)
<input type="checkbox"/>	

*Request sheet must be signed/submitted for scheduling of work. 50% Deposit Required. **PAYMENT IN FULL UPON COMPLETION OF WORK IS EXPECTED.** If you need to make arrangements for PAYMENT please do so PRIOR to commencement of work. By signing, I grant Captain's Orders, Inc. permission to board my vessel in order to fulfill my request.*

X \_\_\_\_\_ TODAYS DATE \_\_\_\_\_