



DEALER BOAT NAME

DEALERS NAME _____

DEALER CONTACT _____ PHONE _____ FAX _____

BOAT OWNERS NAME _____

BOAT LOCATION (TOWN) _____

MAKE _____ MODEL _____

HULL # _____ REGISTRATION # _____

CUSTOM GRAPHICS & LETTERING

www.jeffquest.net

516-317-8204 FAX: 631-563-9088

TODAYS DATE: ____ / ____ / ____

DATE NEEDED: ____ / ____ / ____

<i>NAME</i>
<i>PORT</i>

AREA DIMENSIONS: HEIGHT: _____ LENGTH: _____ REMOVE OLD NAME: NO YES VINYL PAINT

COLORS: PRIMARY _____ SECONDARY _____ ADDITIONAL _____

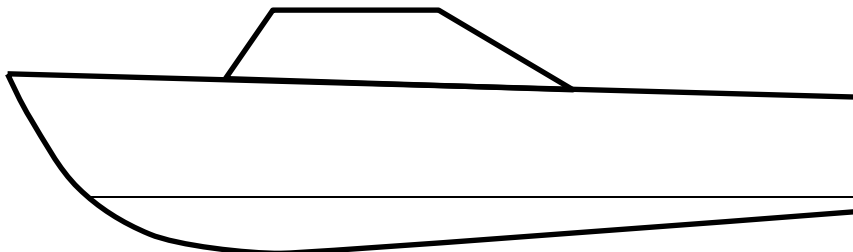
LETTER STYLE: BLOCK SCRIPT TIMES NO PREFERENCE SHADOW OUTLINE

PORT SIDE STBD SIDE STERN 2 SIDES DOCUMENTED BOAT (No Letter Under 4")

TEXT ONLY TEXT & GRAPHICS FULL CREATIVE CONTROL GIVEN TO JEFFQUEST

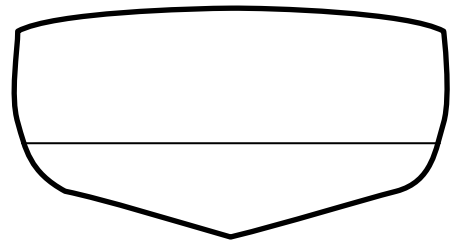
CUSTOM GRAPHICS: _____ HULL COLOR _____

CIRCLE AREA WHERE NAME/GRAPHICS TO BE APPLIED:



SKETCH IN CABIN DOORS, ANTENNAS

CONSOLE OR CABIN (SAME)



SKETCH IN DOORS, ENTRIES, & SWIM PLATFORMS

CUSTOMER APPROVAL

I have reviewed this sheet and agree that the directions spelled out for the **NAME ON MY BOAT** are correct according to the available space:

Location Text Letter Style Color

Customers Signature

Date

Special Instructions / Directions to Boat

Print Blank - Complete Form - Fax to: 631-563-9088