

BREAK IN & FORCE OUT

FORM INSTRUCTIONS:

- 1. **IDENTIFY:** Complete this form to capture your **BREAK IN** opportunity.
- 2. **CONFIRM:** Send completed form to your Blackmer Regional Manager for approval.
- 3. **SUBMIT:** Send this form with approval information (or signatures), and your purchase order to blackmerorders@psgdover.com

Identify		
DISTRIBUTOR:		END-USER:
Company Name, Address/Branch _____		Company Name, Address/Branch _____
COMPETITOR INFO:		
Competitor Name / Brand	Installed Item Number / Description	Qty.
SYSTEM CONDITIONS: <i>(use attached Blackmer Application Data Sheet, if needed)</i>		
BREAK-IN PUMP AND/OR COMPRESSOR DETAILS:		
Item Number	Item Description	Net Price \$
FOLLOW-UP ACTIVITIES:		

Confirm	
DISTRIBUTOR SALES PERSON:	BLACKMER REGIONAL SALES MANAGER:
Signature / Date _____	Signature / Date _____
Name (print) _____	Name (print) _____
FACTORY APPROVAL:	
Geoff VanLeeuwen & Ron Crouch, dated February 11, 2019	