



EZ Order Registration Form

Company Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

Please fax the completed form to 800-235-2885 for processing.

Primary Users Name: _____
First Last

APC Log-In Name: _____

APC Password: _____

E-Mail Address: _____

View Dealer Cost Place Orders Online Change Ship To's View Encrypted Dealer Cost

Second Users Name: _____
First Last

APC Log-In Name: _____

APC Password: _____

E-Mail Address: _____

View Dealer Cost Place Orders Online Change Ship To's View Encrypted Dealer Cost

It is the responsibility of the owner / principal or the primary contact on this form to inform us if a user is terminated or no longer has purchasing privileges.

APC Corporate Use Only:

Branch Manager's Approval: _____

Call 800-234-6700 with Questions.

Visit us at www.apcpoolandspaparts.com