

GUN RACK ORDER FORM

To ensure the correct product is built/shipped, please complete the following form and send it to Pro-gard Products. This form must be completed with every order for a gun rack. If this form is not completed your order may be delayed. This form is for distributor use only. The Distributor is responsible for the information provided and must provide signature upon completion. Thank you for your cooperation.

PART 1

Distributor: _____

Purchase Order: _____

Contact Name: _____

Phone Number: _____

Email: _____

PART 2

Vehicle Make: _____

Model: _____ Year: _____

Partition in vehicle: Yes _____ No _____

If Yes, which manufacturer and type:

PART 3 **Mark 1st Firearm With: F1** **Mark 2nd Firearm With: F2**

<u>Pump Shotguns</u>	<u>Semi Automatic Shotguns</u>	<u>Rifle</u>
<input type="checkbox"/> Remington 870 Police Magnum	<input type="checkbox"/> Beretta 1301 Tactical	<input type="checkbox"/> AR-15 Platform
<input type="checkbox"/> Remington 870 Express/Wingmaster	<input type="checkbox"/> Benelli M4 Tactical	Barrel Length: _____
<input type="checkbox"/> Mossburg 500 / 590	<input type="checkbox"/> Remington 1187	Handguard Length: _____
<input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 8 Shot	<input type="checkbox"/> Other: _____	H&K - Model: _____
<input type="checkbox"/> Mossburg 930		<input type="checkbox"/> Other: _____
<input type="checkbox"/> Benelli Nova		
<input type="checkbox"/> Benelli Super Nova		
<input type="checkbox"/> Other: _____		

*If weapon is not listed, please attach/send photo of weapon with this form.

PART 4

Select Key Type:

Handcuff Key

Vending Machine (Barrel) Key

Straight Key

*If no key type is selected, our standard handcuff key will be sent by default.

PART 5

What Accessories Does the Weapon Have?

F1 F2

Hand Guard

 Brand: _____

Side Saddle

Carry Handle

Vertical Fore grip

Sight/Scope (Photo of gun required)

 Brand: _____

 Model: _____

 Location: _____

Light (Photo of gun required)

 Brand: _____

 Model: _____

 Location: _____

Silencer (Photo of gun required)

You may also circle the location of the accessories you have on photos below:

NOTE: Pro-gard Products requires at least three inches to lock around the forearm.

PART 6

Select Gun Rack: (\$100.00 List Price Up-Charge per Universal Lock Addition)

G4906 Series, Single Vertical Retro-fit

G5000 Series, Flat Surface Mount

GPC Series, 1/2 Cage Pro-cell Vertical Mount

GVM Series, Vertical Self-Supporting Mount

GVPM Series, Vertical Partition Mount

GMM Series, Motorcycle Mount

GTM Series, Sedan Trunk Mount (Interceptor Sedan & Charger only)

PART 7 **Signature Required:**

Agency/Company Name: _____

Date: _____

Print Name: _____

Signature: _____



Firearm 1 (F1)



Firearm 2 (F2)



800.480.6680 | www.pro-gard.com

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