

**MARINE JOB ORDER**

**COMPANY** \_\_\_\_\_ **Date** \_\_\_\_\_

**CONTACT** \_\_\_\_\_ **A/E** \_\_\_\_\_

**POSITION** \_\_\_\_\_ **Phone#**(\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

**PAY RANGE** \_\_\_\_\_ **Fax #** (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

**WHEN** \_\_\_\_\_ **BENEFITS:** \_\_\_\_\_

**WHERE** \_\_\_\_\_ \_\_\_\_\_

**HITCH** \_\_\_\_\_ \_\_\_\_\_

**BOAT TYPE** \_\_\_\_\_ **# of BOATS OWNED** \_\_\_\_\_

**COMPANY PAID TRANSPORTATION OFFERED:** Y N **from office**

**DRIVERS LICENSE REQUIRED** Y N

**Z-CARD REQUIRED** Y N

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**COMMENTS**

**Please send via fax to our office at 251.380.0571 or  
return email wsullivan@marinejobs1.com**

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Do you accept Payroll Mailing Agreements Y N

Payroll Clerk's Name \_\_\_\_\_

MailingAddress \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Payroll Phone # (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Payroll FAX # (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

Pay Period Ends \_\_\_\_\_ Checks Mailed \_\_\_\_\_