



**NEW CUSTOMER INFORMATION FORM**

Company Name: \_\_\_\_\_

Bill To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ship To If Different Than Bill To:  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Contact: \_\_\_\_\_

Manager: \_\_\_\_\_

Ship Via: \_\_\_\_\_

Email: \_\_\_\_\_

Payment: \_\_\_\_\_ COD \_\_\_\_\_ Terms \_\_\_\_\_ Credit Card

- If terms selected a credit application must accompany this form.
- If credit card is selected a credit card information form must accompany this form.

Special Instructions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR OFFICE USE ONLY:**

Sales Representative: \_\_\_\_\_ Number: \_\_\_\_\_

Route: \_\_\_\_\_

Delivery Date: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Signature: \_\_\_\_\_

Account #: \_\_\_\_\_