

**CUSTOMER WORKSHEET
NEW /REVISION**

Date Submitted: _____		Customer Relations Rep: _____	
Customer Name: _____	Dunn & Bradstreet # (if known), _____ or year established: _____		
Bill To: _____	Ship To: _____		
_____	_____		
_____	_____		
_____	Zip + 4	_____	Zip + 4
Signature: _____	Date: _____	_____	_____
Print Name: _____	Print Title: _____	_____	_____
Main Phone #: _____	Accounting Phone #: _____	_____	_____
FAX#: _____	E-Mail Address: _____	_____	_____
_____	Website Address: _____	_____	_____

Form of Payment:

Check/Wire _____ Cash in Advance _____ Credit Card _____ M/C VISA _____

Tax Exempt Certificate #: _____ Federal ID #: _____

Comments: _____

Do you have a resale certificate? Yes No If yes, you must provide.

Preferred Carrier / Forwarder: _____ Account #: _____

Address: _____ City: _____ State: _____ Zip +4 _____

Market: Cat Code 12 - _____

Territory: Cat Code 13 - _____

AE#: Comm. Code 1 - _____

CRR#: Comm. Code 2 - _____

Amount of first order: _____

ACCOUNTING USE ONLY

Credit Limit: _____

Terms: _____

Date: _____ Signature _____

Credit Reference Request Form

Estimated Annual Sales: _____

Customer Must Provide

Please attach bank references.

Bank Name: _____

Address: _____

Account #: _____ Telephone #: _____

Please Include 3 Credit References

	<u>Name</u>	<u>Address</u>	<u>Telephone #</u>	<u>Fax #</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

CHECKED PROSPECTS & CUSTOMER DATABASE FOR DUPLICATION