

Customer Information Form

INTORQ

setting the standard

(Please type the information on the form. Save the form as your company name _ customer information).

Company Name: _____

Address: _____

City: _____ ST: _____ Zip: _____ County _____ Country: _____

TAX ID: _____

Tax Exempt: (Please attach the certificate if the box is selected.)

**Communication Preference: Regular Mail Fax EMail (Please note all Order Confirmations will be sent to this contact).
(Please select one of the above)**

Communication Contact Name: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Shipping:

Shipping Address (if different from billing address)

We ship using UPS only for Ground shipments up to 100lbs. (* Note)

UPS ACCT: _____ (If no acct # to bill shipping will be added to invoice)

3rd party shipping required

Shipments over 100lbs will go freight (*Note) – *Anything more will compromise the shipping quality of the order and we cannot allow that.

Freight Company: _____

Contact # to schedule a pick-up: _____

Account#: _____

Special Shipping Instructions:

Shipments to Canada or Mexico

Accounting:

Billing Address if different from company: _____

We are a green company so all invoices are emailed to recipients. Please provide an email account all company invoices can be directed to. Enter the email address below.

Email: _____

Account Contact Name: _____

Phone#: _____

Fax#: _____

Email: _____

Terms: Credit Card 30 Days Net (pending credit application approval)

Invoice Submitted by Web Access Portals

Please send your sales rep the set-up instructions and link to web portals. Be sure to included navigation directions and instructions for submitting invoices.

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