



# CUSTOMER INFORMATION FORM

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☐ ORDER PENDING ☐ QUOTE ONLY

## **COMPANY INFORMATION**

☐ New Customer ☐ Update Customer

Legal Company Name:

Address:  City:

State:  Zip:  PH:  Fax:

## **FINANCIAL INFORMATION**

Dunn and Bradstreet Number:

Expected Annual Dollar Amt:  Approx First Order Amt: \$

Method of Payment ☐ Check ☐ Wire Transfer (ARC)

## **CONTACT INFORMATION**

| NAME | ROLE               | EMAIL | PHONE |
|------|--------------------|-------|-------|
|      | Accounts Payable   |       |       |
|      | Purchasing Manager |       |       |

## **SHIPPING INFORMATION**

Ship to Address:

City:  State:  Zip Code:

Receiving Hours:  Phone:

Receiving Contact Name:

All orders are +/- 10% of Total Quantity / +/- 30 Parts on orders of 300 or less

Date:

Sales Rep:

### **Customer Defaults**

Standard Inks:

Unitization: ☐ Bale ☐ Core ☐ Skid ☐ Other:

Max Unit Height:

Milage (One Way):

☐ CPU

**Finishing and/or Shipping Messages:**