New Account Information Form



Company Information		
Legal Business Name of Company: Business Address: City, State, Zip:		
Federal Tax ID #:	State Tax ID#:	
Telephone: Email:	Fax:	
How long in Business:	Individual [] Partnership [] Corporation []
Company Officers		
President:	Address:	
Phone/Cell:	City, State, Zip:	
Vice-President:	Address:	
Phone/Cell:	City, State, Zip:	
Accts Payable:	Address:	
Phone/Cell:	City, State, Zip:	
Buyer:	Address:	
Phone/Cell:	City, State, Zip:	
Main Suppliers References: Give or	nly names of those you buy from an open account	
Business Name:	Address:	
Contact Person:	City, State, Zip:	
Telephone:	Email:	
Fax:		
Business Name:	Address:	
Contact Person:	City, State, Zip:	
Telephone:Fax:	Email:	
-		
Business Name: Contact Person:	Address: City, State, Zip:	
Telephone:	Email:	_
Fax:		
Bank Information		
Name of Bank:	Address:	
Officer:	City, State,Zip:	
Branch:	Account #:	
Phone:Fax:	Email:	
By:	Title:	