

## New Customer Application

### Company Information

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

Circle One:    Partnership            Sole Proprietorship            Corporation

Sales Tax Identification: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Address (if different) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_ Do you sell on Amazon? Yes/No If so, under what name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Number of years under present owner: \_\_\_\_\_

Person responsible for payments: \_\_\_\_\_ Email: \_\_\_\_\_

### Business References

Business references: Please list two food companies that you do business with:

1. \_\_\_\_\_

|              |              |     |
|--------------|--------------|-----|
| Company Name | Contact Name | Tel |
|--------------|--------------|-----|

Address \_\_\_\_\_

2. \_\_\_\_\_

|              |              |     |
|--------------|--------------|-----|
| Company Name | Contact Name | Tel |
|--------------|--------------|-----|

Address \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_