

## New Customer Setup Form

Company Name					
Legal Name (on W9*)					
Billing Address					
City		State		Zip	
Phone					
Website					
Billing/AP Contact Name					
Email to Send Invoices					
Phone					

Ship to Address (if different)					
City		State		Zip	
Is an Liftgate Needed?	Yes		No		Receiving Hours
Is a Delivery Appt Needed?	Yes		No		
Receiving Contact Name					
Email					
Phone					

Additional Contact Name					
Email					
Phone					

Please return this form with a copy of your W9 and any state issued sales tax exemption certificates your company has (if applicable). *Sales tax rates are determined by the address that any items are shipped to. Please note that we will be required to charge sales tax if an exemption certificate for the ship to address is not provided.*