

**New Customer Information Sheet**

Legal Name: \_\_\_\_\_ Federal Tax ID#: \_\_\_\_\_

DBA: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Website: \_\_\_\_\_ Year Established: \_\_\_\_\_

Accounts Payable Contact Name: \_\_\_\_\_ Accounts Payable Telephone Number: \_\_\_\_\_

Accounts Payable Email Address: \_\_\_\_\_ Preferred Payment Method: \_\_\_\_\_ ACH \_\_\_\_\_ Wire

Estimated Monthly Purchases From Val-Fit: \_\_\_\_\_ Check \_\_\_\_\_

Receive invoices by email or regular mail? \_\_\_\_\_ Email \_\_\_\_\_ Mail If email, please provide the preferred email address: \_\_\_\_\_

Is this a subsidiary or branch location? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please provide parent company name? \_\_\_\_\_

**Mailing Address**

**Shipping Address**

Mailing Address 1: \_\_\_\_\_ Shipping Address 1: \_\_\_\_\_

Mailing Address 2: \_\_\_\_\_ Shipping Address 2: \_\_\_\_\_

Mailing City / State / Zip: \_\_\_\_\_ Shipping City / State / Zip: \_\_\_\_\_

Mailing Country: \_\_\_\_\_ Shipping Country: \_\_\_\_\_

**Bank Reference**

Bank Name: \_\_\_\_\_ Address Line 1: \_\_\_\_\_

Attention: \_\_\_\_\_ Address Line 2: \_\_\_\_\_

Email Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_

Account Number: \_\_\_\_\_ Bank Routing Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Trade Reference 1**

Name: \_\_\_\_\_ Address Line 1: \_\_\_\_\_  
Attention: \_\_\_\_\_ Address Line 2: \_\_\_\_\_  
Email Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Trade Reference 2**

Name: \_\_\_\_\_ Address Line 1: \_\_\_\_\_  
Attention: \_\_\_\_\_ Address Line 2: \_\_\_\_\_  
Email Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Trade Reference 3**

Name: \_\_\_\_\_ Address Line 1: \_\_\_\_\_  
Attention: \_\_\_\_\_ Address Line 2: \_\_\_\_\_  
Email Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Trade Reference 4**

Name: \_\_\_\_\_ Address Line 1: \_\_\_\_\_  
Attention: \_\_\_\_\_ Address Line 2: \_\_\_\_\_  
Email Address: \_\_\_\_\_ City / State / Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**For Internal Use Only**

Customer ID: \_\_\_\_\_ Corporate Address ID: \_\_\_\_\_  
Sales Terms: \_\_\_\_\_ Credit Status: \_\_\_\_\_  
Sales Rep ID: \_\_\_\_\_ Credit Limit: \_\_\_\_\_  
Default Branch: \_\_\_\_\_  
Sales Tax Exemption State: \_\_\_\_\_ Sales Tax Exemption ID Number: \_\_\_\_\_  
Sales Tax Exemption Certificate on File: \_\_\_\_\_ W9 On File: \_\_\_\_\_