# CUSTOMER INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | Date business commenced |  |
| Company name |  |  |  |
| Phone |  |  |  |
| E-mail |  |  |  |
| Registered company address |  | City, State & ZIP Code |  |
| Tax ID# |  | Company Website |  |
| Primary billing addressCity, State ZIP Code |  | Name of Office Manger or Accounts Payable Contact |  |
| Phone |  | Phone |  |
| Fax |  | Fax |  |
| E-mail |  | E-mail |  |
| Sales Tax Exempt |  | Sales Exempt Certificate Attached |  |
| Do You Require a Purchase Order? |  | W9 Certificate Attached |  |

1. All invoices are to be paid 30 days from the date of the invoice unless stated in a signed contract.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this form, you authorize Ted Berry Company, Inc to make inquiries into the banking and business/trade references that you have supplied.
4. Remittances made after 30 days of the date of statement are subject to a service change of 1½% per month added. This will be added to the overdue amount each month it remains unpaid.
5. The applicant will hereby also pay any and all service charges placed on this account because of late payments.
6. Credit may be suspended when the indebtedness is not paid within terms or reduced in reasonable amounts.
7. If Ted Berry Company, Inc finds it necessary to resort to collection action, all costs including legal fees will be paid by applicant.

# I/We affirm that all the information given is true and complete and I/we agree to the conditions and terms stated above.

|  |  |
| --- | --- |
| Signature |  |
| Name and Title |  |
| Date |  |