

Customer Information Form



Company Name: _____

Mailing Address: _____

City: _____ St: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Website: _____

Primary Contact: _____ Phone: _____

Secondary Contact: _____ Phone: _____

Does your company have a different physical Address?

Address: _____

Is your company Tax Exempt?

State: _____ Exempt #: _____ Exp. Date: _____

Does your company require purchase order numbers on all purchases?

Yes No

Please indicate which Branch you will be primarily purchasing from:

Birmingham Mobile Montgomery Huntsville

Little Rock Jackson Pensacola Nashville

Please acknowledge that you have verified all information above to be accurate.

Signature: _____ **Date:** _____

Please provide the supporting documents needed to complete your account set up. Electronic Supply requires all customers to provide a current business license and tax exemption certificate, if exempt. This form is strictly used to set up customer accounts in our system. This is not an application for open account or company check.

Fax to: 1-888-850-0263
Thank You for your business!