



NEW CUSTOMER ACCOUNT INPUT FORM

Salespersons use this form to have a new customer account set up in our accounting system.

Date: _____

Customer ID: _____
(assigned by accounting)

Customer Name: _____

dba Name if different: _____

Delivery Address: _____

Mailing Address if different from delivery address: _____

Sales tax ID: _____

Approved Buyers Names: _____

Phone #: _____ Fax #: _____

Buyers email address: _____

Accounts Payable contact/phone/email: _____

Mailing or email address for statements: _____

Initial terms requested: _____ Initial terms authorized: _____
(See credit terms policy notice.) (Owner of ColoPac)

Credit application provided: yes no | Completed application received*: yes no

Credit limit requested: _____ Credit limit authorized: _____

Sales Rep Name/ #: _____ / _____ Sales acct: _____ (1 for CPP, 5 for RDS)

Statements required (if other than Friday, weekly)*: _____

IC part price level (other than RDS Inc.): _____

Notes:

TURN THIS FORM INTO CUSTOMER SERVICE

*- Credit application goes to ianh@colo-pac.com with a copy of this new account form for consideration of terms other than COD.

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