



Your source for auto body & auto repair supplies

13 Hicks Street Lindenhurst NY 11757

T 800.434.5141

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info@pdqautosupplies.com

New Customer Setup Form

Company Information:		
Name:		
Address:		
City:	State:	Zip:
Tele:	Fax:	E-mail:

Shipping Address: <i>(if different from above)</i>		
Name:		
Address:		
City:	State:	Zip:
Tele:	Fax:	E-mail:

Billing Information:		
Contact Name:		
Tele:	Fax:	E-mail:
State Resale # or Taxpayer ID#:		

Payment Information:	<input type="checkbox"/> American Express	<input type="checkbox"/> Discover	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa
Cardholder Name:				
Card #:	Exp:	/	CCV:	

Notice to Buyer: DO NOT SIGN THIS APPLICATION BEFORE YOU READ IT By signing below on behalf of your business, you represent that your business is a valid business entity; that all purchases made on this account will for purposes other than personal, family or household use; and that you are an authorized representative of the business with authority to enter into contractual agreements. On behalf of the business, you certify that all information provided in this application is complete and accurate and you agree to be bound by the terms of the New Customer Agreement.

SIGNATURE OF COMPANY'S AUTHORIZED REPRESENTATIVE

DATE

PRINTED NAME

TITLE