

# Account Set Up / Change Form

\_\_\_\_\_ New Account

Date \_\_\_\_\_

\_\_\_\_\_ Change Account

Customer Number \_\_\_\_\_

## BILL TO INFORMATION

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

## SHIP TO INFORMATION

Ship to Name \_\_\_\_\_

Ship to Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

## BUSINESS INFORMATION

President / Owner \_\_\_\_\_ Phone # ( \_\_\_\_\_ ) \_\_\_\_\_

Cellular Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Facsimile # ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address \_\_\_\_\_

**Purchase** Contact: \_\_\_\_\_ E-mail \_\_\_\_\_

Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Facsimile # ( \_\_\_\_\_ ) \_\_\_\_\_

**A/P** Contact \_\_\_\_\_ E-mail \_\_\_\_\_

Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Facsimile # ( \_\_\_\_\_ ) \_\_\_\_\_

**Sales Person** \_\_\_\_\_

Taxable \_\_\_\_\_ Exempt \_\_\_\_\_ Federal Tax ID# \_\_\_\_\_

(If exempt, please attach a copy of signed Resale Certificate)

**Please attach copy of TAFL and Refrigerant Certification**