



CUSTOMER INFORMATION SHEET

COMPANY NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CONTACT NAMES AND TITLES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MOTOR FUEL LICENSE NUMBER: \_\_\_\_\_

SALES TAX NUMBER: \_\_\_\_\_

PREFERRED CARRIER/PHONE/CONTACT: \_\_\_\_\_

CREDIT REFERENCES (Minimum of Two):

\_\_\_\_\_  
\_\_\_\_\_

BANK NAME \_\_\_\_\_ Phone: \_\_\_\_\_

Contact: \_\_\_\_\_

APPROXIMATE ANNUAL VOLUME: \_\_\_\_\_

***Please complete and return back to us via fax at (912) 427-0339 or email at office@harper-industries.com. Thank you.***