



Customer Information and Credit Agreement

Company Information

Company Name	Phone#	Fax #
Address	City	ST Zip
Shipping address (if different than billing address)	City	ST Zip
Company Type: <input type="radio"/> Proprietorship <input type="radio"/> Partnership <input type="radio"/> LLC <input type="radio"/> Corporation <input type="radio"/> Other		
Amount of Credit Requested \$	Have you had credit with us before? <input type="radio"/> Yes <input type="radio"/> No	
If yes, under what name?		
Date Business Established	Type of Business	Purchase order required? <input type="radio"/> Yes <input type="radio"/> No
Federal Tax ID # (if incorporated)	State of Incorporation	
Tax Exempt <input type="radio"/> Yes <input type="radio"/> No	Tax Exempt Certificate #	

****If yes please fax a copy of certificate to 888-932-0020*****

Purchasing Information

Nestle Contract #	Ross Contract #
GPO	Contract #

Owner Personal Information

Full Name (including middle initial)	Title	Social Security #
Home Address	City	ST Zip

Trade Credit References

Company Name	Address	Contact	Phone #
1			
2			

We hereby apply for credit and affirm responsibility, ability and willingness to pay invoices. The above information is warranted to be true and complete. We hereby authorize you to verify and collect information on us. We agree to pay all costs of collection attorney's fees and litigation on this account. We agree that all decisions with respect to the extension or continuation of credit shall be the sole discretion of the creditor.

If you would like access to www.pmdistribution.com please provide a username and password:

User name:	Password:
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If you would like your invoices, statements or order confirmations e-mailed to you please provide an e-mail address for each of those.

Invoice:
Statement:
Order confirmation:

Administrator	E-mail address:
Director of Nursing	E-mail address:
Central Supply	E-mail address:

Guarantor Signature/ Title _____ Date _____

(Office Use Only)

Account Number assigned _____ Salesman Assigned _____ Entered By _____ Date _____