

New Customer Form

with Credit Application

Email completed form to: office@morningsunsupply.com

Morning Sun Supply, Inc.

15 Dykeman Ln., Pawling, NY 12564

(914) 539-0616 | office@morningsunsupply.com

Company Information

Business Legal Name			
DBA (if applicable)			
Street Address			
City		State	Zip
Type of Business	Years in Business	# Employees	
Name & Title of Officers of the Corporation			

Main Contact Information

Name		Phone	
Email		Fax	
Mailing Address			
City		State	Zip

Billing Contact Information Same as above

Name		Phone	
Email		Fax	
Mailing Address			
City		State	Zip

Note: All invoices are issued by email unless otherwise requested.

Sales Tax

Taxable Tax Exempt: If so, Certificate of Authority # _____
Resale Certificate or other Tax-Exempt Form must be provided prior to purchase or with the First invoice, otherwise Tax will be charged.

Order/Credit Request

PO Required (Y/N)	Credit Limit Requested
Authorized Buyers:	

References

Provide at least 1 Bank Reference and 3 Trade References below:

Bank & Contact Name	Cust/Acct #	Email	Phone

Applicant hereby authorizes Morning Sun Supply, Inc. to contact the provided references and any other necessary sources to verify creditworthiness. The applicant consents to the release of relevant credit information by banks, trade references, and other creditors to Morning Sun Supply, Inc. This authorization is in connection with this credit application and will remain valid as long as Applicant maintains an account with Morning Sun Supply, Inc.

X
Printed Name: _____
Title: _____
Date: _____

Office Use Only

--