

Customer Account Form

This form should be completed by Company Purchasing or Accounting Department

Company Information

New Customer Existing Customer

Corporate Company Information: (Used for credit approval)		Ship to: (Must select one) <input type="checkbox"/> Business Address <input type="checkbox"/> Residential Address		
Company Name:		Company Name:		
FEIN#	D&B#	Attn:		
Address 1:		Address 1:		
Address 2:		Address 2:		
City:	State:	Zip:	City:	State: Zip:
Main Phone:	Fax:	Phone:	Ext:	Fax:

Payment Option desired

Net 30 day terms Credit limit requested \$ _____ Credit Card VISA MASTERCARD AMEX

Net 30 day terms are only payable by check or ACH: To establish net 30 day credit terms, credit approval is required. Requests to establish terms are generally processed the same day as received; please fill out this form in its entirety including your Dun & Bradstreet number. You will be notified via email once your account has been set up.

Credit cards: Credit cards must be provided at the time of order. IDentiphoto requires a Net 30 day Purchase Order for purchases exceeding \$5,000 or a 2% credit card convenience fee may be assessed.

Purchase Information (required) - Does your company require the issuance of a Purchase Order in order for purchases to be made?

Purchase Order Required? <input type="checkbox"/> Yes <input type="checkbox"/> No Taxable? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO, please email state tax exempt certificate to ardept@identiphoto.com
If NO, is there a maximum dollar amount before a PO is required? Yes <input type="checkbox"/> No <input type="checkbox"/> If YES, enter amount here \$ _____
If NO, Can anyone place an order: Yes <input type="checkbox"/> No <input type="checkbox"/> If, NO list Authorized Purchasers:

Invoicing Method

Our preferred method for invoicing is E-mail first followed by Fax and US Mail. E-mailed Invoices are sent as PDF attachments.

Accounting Information

Invoice Bill to:	
Company Name:	
Address 1:	
Address 2:	
City:	State: Zip:
Main Accounts Payable Phone Number:	
Email address for AP invoices and statements:	Invoice fax:
Accounts Payable Contact Information:	
Name of Assigned AP Representative (if any):	
Phone:	Email:
Name of Contact for AP inquiries on past due invoices (if different from above):	
Phone:	Email: