



MILLINGTON, TN • LITTLE ROCK, AR

Name of Company: \_\_\_\_\_ LLC/CORP/ INDV? \_\_\_\_\_

EIN # \_\_\_\_\_ DUNS #: \_\_\_\_\_ Number of Years In Business: \_\_\_\_\_

**Bill To** Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**AP Contact:** \_\_\_\_\_ **AP Phone:** \_\_\_\_\_

**AP Email:** \_\_\_\_\_

Tax Exempt Y / N (type of exemption) \_\_\_\_\_ (Provide certificate) Purchase order required? \_\_\_\_\_

**Ship To** Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Main Phone Number: \_\_\_\_\_ Ship To Contact Name: \_\_\_\_\_

Ship To Contact Email: \_\_\_\_\_

**OWNERSHIP:**

1. \_\_\_\_\_ Title: \_\_\_\_\_

2. \_\_\_\_\_ Title: \_\_\_\_\_

**TRADE REFERENCES:**

*May attached company reference sheet if available.*

Company \_\_\_\_\_ PH \_\_\_\_\_ Email \_\_\_\_\_

Company \_\_\_\_\_ PH \_\_\_\_\_ Email \_\_\_\_\_

Company \_\_\_\_\_ PH \_\_\_\_\_ Email \_\_\_\_\_

***We certify that all the information on this form is correct We fully understand your credit terms of Net 30 days and agree to the proper payment in consideration of the extended credit.***

Signed: \_\_\_\_\_ DATE \_\_\_\_\_

Print: \_\_\_\_\_ Title: \_\_\_\_\_

7030 Ryburn Dr. Millington TN 38053  
6812 Lindsey Rd. Little Rock, AR 72206

P: 901-873-5300 F: 901-873-5301  
P: 501-375-9178 F: 501-375-4254