



Sterling-ES New Customer Form

BILL TO INFORMATION:

Company Name: _____

Federal ID Number: _____ Tax Exempt? Yes / No (if yes, you must submit tax exemption form)

Accounts Payable Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Phone: _____ Contact Fax: _____

Contact Email: _____ Web Site: _____

SHIP TO INFORMATION (if different than above):

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Phone: _____ Contact Fax: _____

Contact Email: _____ Additional Info: _____

Please choose method for shipping payment: PrePay and add or

Ship Collect: Account # _____ Carrier _____

CREDIT CARD INFORMATION:

If purchases to Sterling-ES will be with an approved credit card, please provide the following:

Type of Card: Visa / Mastercard (circle one)

Name on card: _____

Card billing address: _____

Card #: _____ Expir. Date: _____ Security Code: _____

Authorized Signature: _____

Please return fax to 540-375-0924 or email to Sales@Sterling-ES.com.

Thank you for your business!



Sterling-ES New Customer Credit Information

Please note all accounts are **NET 30** from invoice date unless otherwise indicated.

For your convenience, Sterling-ES gladly accepts credit card payments at the time of purchase.

BANKING INFORMATION:

Bank: _____ Contact: _____

Branch Address: _____ Phone Number: _____

Account(s) #: _____ Fax: _____

TAX INFORMATION:

D & B (DUNS) #: _____ Federal Tax ID: _____

Tax Exempt #: _____ *Please attach copy of state tax exempt certificate.
All invoices will be billed with tax unless a current exempt certificate is on file.*

TRADE REFERENCES (please provide three):

Business Name: _____ Type of business: _____

Phone Number: _____ Fax Number (Required): _____

Contact Name: _____ Length of business relationship: _____

Business Name: _____ Type of business: _____

Phone Number: _____ Fax Number (Required): _____

Contact Name: _____ Length of business relationship: _____

Business Name: _____ Type of business: _____

Phone Number: _____ Fax Number (Required): _____

Contact Name: _____ Length of business relationship: _____

Fax completed form to 540-375-0924 or email to Sales@Sterling-ES.com.

**Thank you for your help setting up your account. If you have any questions,
please call Susan Smedley or Carolyn Greene at 540-375-0923.**