



New Customer Information Form

Customer Information

Company Name:

Billing Address:

Shipping Address:

Phone:

Fax:

Email:

Federal ID / Tax ID:

Accounts Payable Contact

Name:

Phone:

Email:

Purchase Orders

Are PO Numbers Required? ☐ Yes ☐ No

PO Contact Name:

PO Contact Email:

Bank Reference

Bank Name:

Account Number (last 4 digits):

Contact Person:

Phone:

Trade / Credit References

Reference 1 - Company:

Contact:

Phone:

Reference 2 - Company:

Contact:

Phone:

Reference 3 - Company:

Contact:

Phone:

Agreement

I hereby certify that the information provided is true and correct.

I authorize Tech-Gas Solutions to contact the above references to establish credit.

Authorized Signature:

Printed Name:

Title:

Date: