

ENVIRONMENTAL OFFICE SOLUTIONS NEW CUSTOMER SETUP FORM

This section to be completed by EOS customer: **Terms are considered 100% Prepaid unless a credit application is submitted. Please contact the account department at eos-accounting@eosusa.com.**

Terms: _____

Circle type of company: Individual/Sole Proprietor LLC Corporation

Company Name: _____ FEIN or SSOC: _____

DBA: _____ Resale Certificate # _____ Issuing State: _____

Billing Address 1: _____

Billing Address 2: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Shipping Address 1: _____

Shipping Address 2: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Phone: _____ Fax: _____ Email: _____

Accounts Payable Contact: _____

Phone number: _____ Email: _____

Primarily Purchasing Product Line: _____

Sales Rep: _____

Vendors do NOT Complete below this line – for EOS USE ONLY

This section to be completed by EOS CycleLution team:

CycleLution account #: _____

Date created: _____ Created by: _____

This section to be completed by EOS accounting team:

Account created in Sage (circle one): YES / NO

Date created: _____ Created by: _____