

3855 East Outer Drive
 Detroit, MI 48234
 P: (313) 892-4000
 F: (313) 892-4900



Remit To:
 Anchor Wiping Cloth
 PO Box 34757
 Detroit, MI 48234

New Customer Application

BUSINESS INFORMATION					
Company Name:					
DBA Name (If Applicable):			Tax ID #:		
C. Corp <input type="checkbox"/>	S. Corp <input type="checkbox"/>	LLC <input type="checkbox"/>	Partnership <input type="checkbox"/>	Sole Proprietor <input type="checkbox"/>	Other _____
Phone:		Fax:		Email:	
Physical Company Address:					
City:		State:		ZIP Code:	
Accounts Payable			Name:		
Email:			Phone:		
Address:			Address 2:		
City:			State:		Zip:
Preferred Invoice Delivery Method (Check One):			Mail: <input type="checkbox"/>	Email: <input type="checkbox"/>	Both: <input type="checkbox"/>
Primary Contact for Purchasing/Ordering			Name:		
Email:			Phone:		
Address:			Address 2:		
City:		State:		Zip:	
BUSINESS/TRADE REFERENCES					
1. Company Name:					
Address:		City:		State:	Zip:
Phone:		Fax:		E-mail:	
Type of account:					
2. Company name:					
Address:		City:		State:	Zip:
Phone:		Fax:		E-mail:	
Type of account:					
3. Company name:					
Address:		City:		State:	Zip:
Phone:		Fax:		E-mail:	
Type of account:					
AGREEMENT					
PAYMENT TERMS: NET 30					
1. All invoices are to be paid 30 days from the date of the invoice.					
2. Claims arising from invoices must be made within 7 working days.					
3. By submitting this application, you authorize Anchor Wiping Cloth to make inquiries into the banking and business/trade references that you have supplied.					
Signature			Signature		
Submitted By:		Date:		Approved By:	
				Date:	

REQUIRED - Please include State Tax Exempt form (if applicable)