



## New Customer Registration Form

**Shipping**

**Billing**  *Check if same as shipping address*

Company Name			Company Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone	Fax		Phone	Fax	

**Accounts Payable Contact**

Name	Email
Phone	Fax

**Requested payment terms (please select one):**     Net 30\*     COD\*     Credit Card     Prepaid

\*Net 30 and COD terms are subject to approval by credit references and credit worthiness.  
Invoices outstanding for over 30 days are subject to a 3% per month late payment penalty.

**Would you like your invoices to be emailed?** Yes                      Email Address:

### **Trade References**

Company Name and Contact Name	Email/Phone Number
1	
2	
3	

**What is your company's tax status?**     Taxable on all orders  
 Tax exempt on all orders (tax exemption or resale certificate required)  
 Tax exempt on some orders (tax exemption or resale certificate required)

**What is your type of business?**                       Industrial                       3rd Party                       Other

***I/We certify that the above information is true and correct. I/We agree to pay this account in accordance with the credit terms established above. I/We authorize VanGold Industries to verify this information and/or obtain additional information by securing data from a credit agency.***

Signature	Date
Printed Name	Title

**\*\*\*Customer is to be held responsible for any damages than occur as a result of their own actions or equipment failures. This includes, but is not limited to, spills, equipment damage and/or property damage that is done on site that is deemed the fault of the customer.**