



20 AMITY STREET
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 EMAIL ID:
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CUSTOMER INFORMATION

SSN:	TAX ID Number:		
Company Name:			
DBA:			
Customer Name:			
Telephone: ()	Fax: ()	Cell: ()	
Email:			
Business Address:			
City:	State:	Zip:	
Co-operation:	Proprietor:	Partnership:	Limited Partnership:
Customer Address:			
City:	State:	Zip:	

BANK INFORMATION

Bank Name:		
Address:		
City:	State:	Zip:
Telephone: ()	Fax: ()	
Account Number:	Type of Account:	

Customer Sign: _____ **Date:** _____

BUSINESS & TRADE REFERENCE

Customer Name:		
Address:		
City:	State:	Zip:
Telephone: ()	Fax: ()	Cell: ()
Email:		

Customer Name:		
Address:		
City:	State:	Zip:
Telephone: ()	Fax: ()	Cell: ()
Email:		

Customer Name:		
Address:		
City:	State:	Zip:
Telephone: ()	Fax: ()	Cell: ()
Email:		

Customer Sign: _____ **Date:** _____

Thank you! We will set you up in no time.

Rickys & Rajbhog values your business and assures you that you will very soon consider us your preferred vendors

Visit us at www.rickys-rajbhog.com for further details.

