

## **Business America Services**

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## **ORDER FULFILLMENT APPLICATION**

Legal Name of Business: [	]
DBA: [	
Mailing Address: [	]
City: [	State/Prov: [ ]
Zip/Postal Code: [ ]	Country: [ ]
Phone: [	Cell Phone: [
Email: [	
Website URL: [	
Contact: [	Telephone: [
Product/Service Sold: [	]
Service(s) required: Warehousing [ ] Pick & Pack [ ] Order Fulfillment [ ] Small Package Pickup[ ] Mail Forwarding [ ] Cross Docking [ ] Freight Forwarding [ ] Small Package Forwarding [ ] E-commerce assistance [ ] Amazon.com Services [ ] Incorporation Services [ ] VT-QC Cross-Border [ ]	
BUSINESS OWNERSHIP INFORMATION	
Principal #1 [	% Ownership [
Address: [	
Address (2): [	
City::[	State/Prov: [ ]
Zip/Postal Code: [ ]	Telephone: [ ]
CREDIT CARD INFORMATION  Name on card:   Card #: [ ]	
Secuity Code: [	Expiration Date:
, -	llowing identification: Driver's License, Armed Forces
or Government Card, Passport, Alien Registration Card, or any other credential showing your signature that is traceable to the bearer.  ADDITIONAL INFORMATION?	
I certify that the information submitted is complete, true and accurate.	
X [ ]	Date: [ ]

Signature of Authorized Signer (ESignature entered here represents legal signature)

Thank you for choosing Business America Services

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