

NEW CUSTOMER FORM

To set up your company with the correct information, please complete and submit

YOUR COMPANY INFORMATION

Company Name *(full legal business name)* _____

Street Address _____

City, State, Zip _____

Phone _____ Email _____

Sales Contact _____ Sales Contact Email _____

Marketing Contact _____ Marketing Contact Email _____

Type of Business *(check all that apply)*

Commercial Hospitality Property Management Procurement Aircraft
Residential Retail To-The-Trade Showroom Other _____

BILLING INFORMATION *Payment terms: 60% deposit, balance due prior to shipment*

Company Name _____

Street Address _____

City, State, Zip _____

Accounts Payable Contact _____ Accounts Payable Phone _____

Accounts Payable Email _____

SHIP TO ADDRESS Same As Billing Ship Partial Ship Complete

Name of Receiver _____ Contact Phone _____

Street Address _____

City, State, Zip _____

TAX INFORMATION

Are you a reseller? Yes No *(If yes, please provide Resale Certificate via email to info@thedeloscompany.com. If No, please complete a Sales & Use Tax Certification Form.)*

Are you tax exempt? Yes No *(If yes, please provide Sales Tax Exemption Certificate via email to info@thedeloscompany.com)*



TheDelosCompany.com
Custom Rugs Distinctively Yours

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