

New Customer Profile Form

Please complete this brief profile form so we may serve you better.

PRIMARY CUSTOMER CONTACT

Company Name: _____

ContactName: _____ Email: _____

Address: _____

City: _____

Phone: _____ Ext: _____

Purchasing Contact Info

Contact Name: _____ Email: _____

Title: _____

Address: _____

City: _____

Phone: _____ Ext: _____

Purchase Order Nbr, if available: _____

Billing Contact info/Send Invoices to:

Company Name: _____

Contact Name: _____ Email: _____

Address: _____

City: _____

Phone: _____ Ext: _____

NOTES: _____

BILLING INSTRUCTIONS: - Please ✓ preferred method of receiving Invoices

Email (email address) _____

Mail (billing address) _____

Portal Contact Name: _____

Phone: _____ Ext: _____

Other: Contact Name: _____

Phone: _____ Ext: _____

Completed By:

Name: _____ Date: _____

Phone: _____ Ext: _____

Please return completed form to: virginia.martinez@vrl.net

Account information submitted on this form will remain confidential and be used for the sole purpose of communicating with you.

Thank You! We appreciate your business!