



8 TERRI LANE,
BURLINGTON
NEW JERSEY 08016

MCCOLLISTERS.COM

800.257.9595

Salesperson / Customer Service Rep

--

1. COMPANY INFORMATION

Full Legal Name / Business Entity			Phone Number	Fax Number	Date
Doing Business As (DBA)					
Physical Address	City	State	Zip		
Billing Address (if different from above)	City	State	Zip		
Preferred method to receive invoices (mailed, emailed, etc.)					
Accounts Payable Contact	Phone #	Email			
Principle Owners / Officers			Corporation		

2. BUSINESS CREDIT INFORMATION

Federal Tax I.D.	Year business established	At present location
DUNS #	Credit Line Requested	

3. BANK REFERENCE

Bank Name	Contact	Phone #
Address	City	State Zip

The undersigned understands and acknowledges that invoices rendered by McCollister's or United Van Lines on McCollister's behalf require payment on net 30 day terms. The undersigned further agrees that past due balances shall be assessed a service charge or 1-1/2% per month.

Name	
Signature	Title

PLEASE EMAIL COMPLETED FORM TO ACCOUNTSETUP@MCCOLLISTERS.COM