



ACCOUNT SET UP REQUEST AND SPECIFICATION

Form #48 Rev. F 12/17/15

Please complete digitally or write in legible handwriting to avoid errors.

Section I: About Your Company

Date: _____ Main Contact: _____
 Company Name: _____ Other Contact: _____
 Email: _____
 Street: _____
 City: _____ State: _____
 Zip: _____ Country: _____
 Telephone: () _____ Fax: () _____
 Shipping Address, if different from above (N/A with COD):
 Street: _____
 City: _____ State: _____
 Zip: _____ Country: _____

Section II: About Your Project

We work in many facets of metal finishing. Please describe your products and finishes requested:

Base metal of item: _____ Nickel free processing? Y or N
 Plating service type: Rack Barrel PVD
 Pre-finishing services required: Tub/vibe Polish Satin Other _____
 Will you provide a color standard/ sample for us to match? Y or N
 Notes: _____

Section III: Billing/Shipping Preferences

Preferred method of payment: COD Credit card Credit line (must apply, see your rep.)
 Account contact: _____ Email: _____
 Preferred shipping company: _____ Account: _____
 Method: _____
 Email account to send tracking information: _____

Internal Use

Customer number: _____ Date credit application review: ____ / ____ / ____
 Market code: _____ Controller approval: _____
 Salesperson assigned: _____