

CUSTOMER INFORMATION REQUEST FORM

Address								
Company Name								
*Billing Email					For billing purposes only!			
Billing Address								
City, ST, Zip								
Shipping Address								
City, ST, Zip								
Shipping Preference								
VAT								
*Montalvo prefers to bill v	via ema	ail. Pleas	e provide a " Billing Em	ail"	address	if av	ailable. Thank	you.
Contact	Purchasing				Accounts Payable			
Phone	()		()			
Fax	()		()			
Email								
Name								
Title								
				•				
Financial								
Are you tax exempt?		YES	If yes, plea	se se	send a copy of certificate			
		NO						
Industry								
What are you?		OEM	USI	ER			RESELLER	
What do you do?								
NAICS# (or SIC Code)								
Budget								
Est. Annual Purchase								

The Montalvo Corporation, 50 Hutcherson Drive, Gorham, Maine 04038 USA

Tel: 207-856-2501 / Fax; 207-856-2509 / info@montalvo.com / montalvo.com

Index Code: CS-003 Revision# 0000 Revision Date: 01/01/2017 Department: Customer Service