COMPANY INFORMATION FORM (CIF)



To establish an account for proper processing, please complete the following and email the completed form to your Cold Jet Representative.

Bill To Address:	Accounts Payable Contact:
Company:	Name:
Address 1:	Phone:
Address 2:	Fax:
City:	Email:
State:	
Zip:	Sales Tax Exempt?*
	* If you are tax exempt, please provide your tax exemption certificate with your Company Information Form.
Ship To Address:	Shipping Contact:
Company:	Name:
Address 1:	Phone:
Address 2:	Fax:
City:	Email:
State:	.
Zip:	