



NEW CUSTOMER DATA SHEET

Seattle: (253) 872-9693 • (800) 248-3269 • Fax: (253) 872-0803
Portland: (503) 885-2565 • (866) 994-6375 • Fax: (503) 692-8469

Date: _____

Company Name: _____

BILLING Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

DELIVERY Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Delivery / Receiving Contact Person: _____

Delivery Contact Telephone: _____ Fax: _____

Delivery Contact Email: _____

Receiving Days of Week: _____ Hours Each Day: _____

Receiving Method (check all that apply): DOCK FORKLIFT PALLET JACK HAND UNLOAD

Do you have room for delivery by a 53 foot trailer? (Check one): YES NO

PURCHASING / Ordering Contact Person: _____

Purchasing Contact Telephone: _____ Fax: _____

Purchasing Contact Email: _____

ONLINE ACCOUNT MANAGEMENT: Would you like to set up a Username & Password on our secure online system? (Check one): YES NO

ACCOUNTS PAYABLE Contact Person: _____

Email: _____

How do you receive billing? (Check one): EMAIL FAX

A/P Contact Telephone: _____ Fax: _____

Does your company require Purchase Order numbers? (Check one): YES NO

Other information: _____

Please Print Legibly – Return via FAX to **PIONEER PACKAGING** with Credit Application
or email to Accounting@pioneernw.com.