



# McCue Customer Information Application

Please Complete and return by Fax to 978-741-2542

13 Centennial Drive Peabody, MA 01960

Tel: 800-800-8503 Fax: 978-741-2542

www.mccue.com

Remit to Address: P.O. Box 843070 Boston, MA 02284-3070

Date: \_\_\_\_\_

## Company Information

Business Name

Type of Business

Business Phone

Billing Address

Street

City

State

Zip Code

Name of Accounts Payable Contact

Phone #

Fax #

Principal Name

Title

Federal Tax ID

Duns Number

## Tax Information

Are you Tax Exempt? Yes ☐ No ☐ If Yes, please list state(s) and attach certificates. If No, sales tax will apply.

## Shipping Information

Col ☐

3rd Party ☐

Preferred LTL Carrier

Account #

Col ☐

3rd Party ☐

Preferred Small Box Carrier

Account #

\*Note if no preference is indicated items will ship via McCues preferred carrier

## Electronic Invoices

McCue submits invoices electronically. Please provide your e-mail address or fax number as your preferred way of receiving invoices.

Email

Fax #

I hereby represent that I am authorized to submit this application and that the information is warranted to be true. I/We further represent that the customer applying for credit has the financial ability and willingness to pay all invoices according to the terms set forth here.

Signature

Title

## Credit Information

Payments in advance will be required for all orders until terms are established. To be considered for payment terms, please attach a sheet with bank and at least (3) three trade references that include account numbers and contact information.

Payment terms are Net 30 days.



# McCue

## McCue Customer Information Application Bank & Trade References

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### Your Company

Your Company Name			Phone	Fax
Address	Street	City	State	Zip Code

### Your Bank

Bank Name			D & B Rating	
Contact Name	Email	Phone	Fax	
Address	Street	City	State	Zip Code

### Three Trade References

#1 - Company Name				
Contact Name	Email	Phone	Fax	
Address	Street	City	State	Zip Code

#2 - Company Name				
Contact Name	Email	Phone	Fax	
Address	Street	City	State	Zip Code

#3 - Company Name				
Contact Name	Email	Phone	Fax	
Address	Street	City	State	Zip Code