



GLOBAL
PRODUCTS
 ENTERPRISE LLC

New Customer Profile Form

924 Donata Ct.
 Lake Zurich, IL 60047
 Ph# (847) 847-1654 | Fax# (847) 847-1659

Date: _____

Mailing Information	Shipping Information
Company Name/DBA: _____ Address: _____ City, State, Zip: _____ Attention/Contact: _____ Phone # _____ Fax # _____ E-mail Address: _____ Federal Tax ID Number or SS# _____ Cigarette/Distributor License # (wholesale only): _____ (Please attach a copy of your license)	Company Name: _____ Address: _____ City, State, ZIP: _____ Attention /Contact: _____ Phone # _____ Fax # _____ <u>Special Shipping Instructions:</u> _____ _____ _____
Credit References	
Company Name/DBA: _____ Address: _____ City, State, Zip: _____ Attention /Contact: _____ Phone # _____ Fax # _____ E-mail Address: _____	Company Name/DBA: _____ Address: _____ City, State, Zip: _____ Attention /Contact: _____ Phone # _____ Fax # _____ E-mail Address: _____
Accounts Payable Department	
Company Name: _____ Contact Name: _____ Address: _____ Street Address: _____ City, State, ZIP: _____ Primary Phone # _____ Fax # _____	(Alt) Contact Name: _____ Address: _____ Street Address: _____ City, State, ZIP: _____ Alternate Phone # _____