

Jager Solutions, Inc.
1701 Summit Avenue # 8
Plano, TX 75074
972-424-2767 972-424-2840-fax

NEW CUSTOMER COMPANY INFORMATION

Company Name: _____

Company Phone Number: _____ Company Fax Number: _____

Company Address: _____

Billing Address: _____

A/P Contact Name: _____ A/P Contact E-mail Address: _____

A/P Contact Phone Number: _____ A/P Contact Fax Number: _____

D & B Number _____ Federal Tax I.D. #: _____

Corporation: YES / NO Tax Exempt: YES / NO

Texas Sales & Use Tax Permit #: _____

Officer Name and Address: _____

Please fax a hard copy of Tax Exempt Form with Company Information

BANKING INFORMATION

Bank Name: _____ Account #: _____

Bank Address: _____

Bank Phone: _____ Bank Fax: _____

Contact Name/Title: _____

CREDIT REFERENCES

1) Company Name: _____ Contact Name: _____

Company Address: _____

Contact Phone Number: _____ Contact Fax Number: _____

2) Company Name: _____ Contact Name: _____

Company Address: _____

Contact Phone Number: _____ Contact Fax Number: _____

3) Company Name: _____ Contact Name: _____

Company Address: _____

Approved By : _____ Date: _____

Return completed form to Attn: Betsy Kennaugh Fax 972/ 424-2840 or betsy@jagersolutions.com