



Premium Spring Water From Canada 

NEW CUSTOMER FORM

Company Name: _____ Fed Tax ID/EIN: _____

Business Type:
 Beverage Distributor Retailer Web Site Hotel Restaurant Other: _____

Annual Bottled Water Sales Volume: _____ Est. Monthly Aquadeco Purchases: _____

Buyer Name: _____ Buyer Tel. No.: _____

BILL TO INFORMATION

SHIP TO INFORMATION

Contact Name: _____	Contact Name: _____
Contact Phone: _____	Contact Phone: _____
Contact Fax: _____	Contact Fax: _____
Contact Email: _____	Contact Email: _____
Web Site: _____	Web Site: _____
Address 1: _____	Address 1: _____
Address 2: _____	Address 2: _____
City: _____	City: _____
Sate/Province: _____	Sate/Province: _____
Zip/Postal Code: _____	Zip/Postal Code: _____
Country: _____	Country: _____

CREDIT INFORMATION

Bank Name: _____ Bank Phone: _____

Bank Address: _____

Bank Contact: _____ Bank Phone/Fax: _____

Acct #: _____ Info Release Sig: _____

REFERENCES

Company: _____	Address: _____
Phone: _____	Fax: _____
Contact: _____	Bus Type: _____
Company: _____	Address: _____
Phone: _____	Fax: _____
Contact: _____	Bus Type: _____
Company: _____	Address: _____
Phone: _____	Fax: _____
Contact: _____	Bus Type: _____

PLEASE FILL OUT, ATTACH RESALE/SALES TAX EXEMPTION CERTIFICATE & FAX TO 1-212-564-7512

421 Seventh Avenue, New York NY 10001
Tel. 1-212-564-7250

Office Use

Aquadeco Sales Rep: _____

Cust. #: _____

Date Rcvd: _____