



Customer Set Up Form

To facilitate the processing of your orders, please complete this form and fax it to the appropriate office location. Thank you.

BILLING INFORMATION

Business Name: _____

Billing Address: _____

City, State & Zip Code: _____ County: _____

Contact Name: _____

Contact Telephone: _____ Fax _____

Contact Email: _____

Do you require Purchase Order Numbers?: Yes _____ No _____

Accounts Payable Contact: _____

Phone: _____ Fax: _____

DELIVERY INFORMATION:

Delivery Location Name: _____

Delivery Address: _____

City, State & Zip Code: _____

Contact Name: _____

Contact Telephone: _____ Cell: _____

Delivery Hours: _____

If the carrier is looking for directions, may we have them contact you? Yes _____ No _____

If you have multiple delivery locations, please complete a separate page for each.

Please fax back to the _____ office listed below.

ELGIN OFFICE
385 Airport Road, Suite 108, Elgin IL 60123
888-499-7258 Phone / 847-608-8130 Phone / 847-608-8135 Fax

LYONS MINE OFFICE
1420 State Road 14, Lyons KS 67554
800-879-7258 Phone / 620-257-5626 Phone / 620-257-5052 Fax