



410 South 16th Street
Easton, PA 18042

Tel: 610-252-6797 www.pamperedgrape.com
Fax: 610-252-7190 accounts@pamperedgrape.com

New Account Information

Company Name: _____

Tel: _____

DBA: _____

Fax: _____

Contact Person: _____

E-mail: _____

Federal Tax ID #: _____

Tax Resale #: _____

For on-line ordering:

Username: _____

Password: _____

Billing Address:

Tel.: _____

Fax: _____

Shipping Address (if different than billing):

Tel.: _____

Fax: _____

Purchasing (if different than above):

Contact: _____

Tel: _____

Accounts Payable (if different than above):

Contact: _____

Tel: _____

Initial Payment & Net 30 Term Agreement

I hereby certify that the above-named purchaser is responsible for making purchases for the above-named company. I agree to pay any and all invoices net 30 to Pampered Grape. I acknowledge and authorize Pampered Grape to charge my credit card to settle overdue invoices that are not paid within 45 days. I agree to be responsible for any and all charge-back fees resulting from disputed charges if this process is invoked.*

*** To establish net 30 terms, opening order must be pre-paid or C.O.D.**

Credit Card #: _____

CC Billing Name: _____

Exp.: _____

CC Billing Address: _____

Visa MasterCard AmEx

Signature: _____

Date: _____

Bank & Trade References

Bank References:

Company: _____ Acct #: _____
Contact: _____ Fax: _____

Trade References:

Company: _____ Acct #: _____
Contact: _____ Fax: _____

Company: _____ Acct #: _____
Contact: _____ Fax: _____

Company: _____ Acct #: _____
Contact: _____ Fax: _____

I authorize you to give Pampered Grape information about my account.

Signature: _____ **Date:** _____

**Please fax to 1-610-252-7190 with a completed Resale Certificate.
Both pages must be signed in the appropriate areas.**