

# NEW CUSTOMER SET UP FORM



**T H R E E  
H A N D S**

*Enhancing lives through trend, design and décor.*

ATTACH BUSINESS CARD HERE

Please fill out completely and email to CustomerService@threehands.com

## BUSINESS INFORMATION

First name:		Last Name:	
Title:	Phone:	E-mail:	
Business Name:		DBA:	
Billing Address:		City:	State: Zip:
AP Contact:	Phone:	E-mail:	
Fax:	Type of Business:	Website:	
Date Opened:	Resale #		
Shipping Address:		City:	State: Zip:
Shipping Contact:		Shipping Contact Phone:	
<input type="checkbox"/> Same as Billing Address		Loading Dock Available: YES <input type="checkbox"/> NO <input type="checkbox"/>	

## TRADE REFERENCES

Company Name:	Phone:	E-mail:
Company Name:	Phone:	E-mail:
Company Name:	Phone:	E-mail:

## DISCLAIMER AND SIGNATURE

I have read, understand and agree to all Three Hands Terms and Conditions  
All initial orders will be on prepaid basis only.

Signature	Date
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## Internal Use Only

Customer Code:	Order #:	Order \$ amount:	Terms Requested:
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We look forward to serving you!