

## NEW ACCOUNT APPLICATION FORM

### Which of our Account Executives contacted you?

ACCOUNT EXECUTIVE NAME	
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### COMPANY INFORMATION

LEGAL NAME			
TRADE NAME/DBA			
TYPE OF BUSINESS		DUNS #	
ARE YOU TAX EXEMPT OR A RE-SELLER? (Y/N)		IF YES, PLEASE ATTACH A COPY OF YOUR TAX EXEMPT OR RE-SALE CERTIFICATE	

### COMPANY ADDRESS

<b>BILL TO ADDRESS</b>				
CITY		STATE		ZIP CODE
COUNTRY		PHONE #		FAX #
CONTACT NAME		EMAIL		
<b>SHIP TO ADDRESS</b>				
SHIP TO NAME				
CITY		STATE		ZIP CODE
COUNTRY		PHONE #		FAX #
CONTACT NAME		EMAIL		
FREIGHT FORWARDER NAME		PHONE #		

### COMPANY CONTACTS

#### MAIN BUSINESS CONTACT

CONTACT NAME		TITLE	
EMAIL		PHONE #	

#### SHIPPING / RECEIVING DEPARTMENT

CONTACT NAME		TITLE	
EMAIL		PHONE #	
RECEIVING HOURS			

Destination Lift Gate?    Destination Inside Delivery?    Limited Access Delivery Area?    Residential Delivery?    Prior Shipment Notification?  
 Yes    No    Yes    No    Yes    No    Yes    No    Yes    No

ACCOUNTS PAYABLE DEPARTMENT

CONTACT NAME		TITLE	
EMAIL		PHONE #	

Would you like to receive your invoices via email?

Yes  No  Email(s) for invoices (1) \_\_\_\_\_ (2) \_\_\_\_\_

Are you an Avendra Customer?

Yes  No  If so please provide your Avendra Code: \_\_\_\_\_

PURCHASING DEPARTMENT

CONTACT NAME		TITLE	
EMAIL		PHONE #	

TRADE REFERENCES: LIST NAME, PHONE NUMBER, AND CONTACT NAME

REFERENCE 1	
REFERENCE 2	

AS AN AUTHORIZED SIGNATORY I:

- 1) CERTIFY THAT I AM AUTHORIZED SIGNATORY AND AM AUTHORIZED TO COMMIT MY ORGANIZATION TO A BINDING AGREEMENT, AND FURTHER CERTIFY THAT THE INFORMATION PROVIDED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.
- 2) IN THE EVENT CREDIT TERMS ARE SOUGHT, AUTHORIZE YOUR COMPANY TO VERIFY CREDIT WORTHINESS BY CONTACTING THE REFERENCES SUBMITTED.
- 3) AGREE TO ABIDE BY HARBOR LINEN LLC. DBA 1CONCIER TERMS (NET 30 DAYS) ON ALL INVOICES UNLESS OTHERWISE AGREED IN WRITING. FURTHERMORE, I/WE UNDERSTAND THAT IF THE ACCOUNT IS PAST DUE, HARBOR LINEN LLC. DBA 1CONCIER MAY HOLD ORDERS UNTIL THE TIME THE ACCOUNT IS CURRENT.
- 4) AGREE THAT, IF ANY LEGAL ACTION IS INSTITUTED TO COLLECT PAST DUE AMOUNTS, HARBOR LINEN LLC. DBA 1CONCIER SHALL BE ENTITLED TO RECOVER, IN ADDITION TO ALL SAID PAST DUE AMOUNTS, LEGAL INTEREST, COLLECTION COSTS AND A REASONABLE ATTORNEY'S FEE.
- 5) AGREE TO THE TERMS OF SALE AND CONDITIONS SET FORTH AT 1CONCIER.COM/TERMS, WHICH APPLY TO ALL HARBOR LINEN LLC. DBA 1CONCIER

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_  
 PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**IF YOU ANTICIPATE REQUIRING A CREDIT LIMIT GREATER THAN \$10,000 WITH OUR COMPANY, THIS SECTION MUST BE COMPLETED AND SIGNED BY AN AUTHORIZED BANK SIGNATORY**

**BANK INFORMATION**

BANK NAME			
ADDRESS			
TYPE OF ACCOUNT		ACCOUNT #	
CONTACT		PHONE #	

NAME OF COMPANY: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_  
 PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
 EMAIL ADDRESS (REQUIRED) \_\_\_\_\_