

Greenlight Express Customs Brokerage

New Customer Form

Company Name: _____

Physical Address: _____

Mailing/Billing Address: _____

Main Phone#: _____ **Emergency Phone#:**

_____ **Contact Name:** _____ **Fax#:**

Email: _____

Owner/Manager Name: _____

Accounting Contact: _____ **Acct. Phone#:** _____

Federal Tax ID (IRS#) _____ **Years in Business** _____

Bank Name: _____ **Bank Phone:** _____

Trade References:

Name _____ **Contact/Phone** _____

Name _____ **Contact/Phone** _____

Name _____ **Contact/Phone** _____