

# Food Service Onboarding

## Customer Information

Company Name

Your Name

Title

Your Email Address

I am authorized to make purchases for this company. (Yes)

Sales Tax #

Mailing Address

Street

City

State

ZIP

## Payment Information

Are you responsible for payment? (Yes)

Responsible Party's Name

Title or Dept.

Company Email Address

Business Phone

Cell Phone

If any information for this person is different from yours above, please complete the following:

Mailing Address

Street

City

State

ZIP

Which Category Best Describes Your Food Service Operation?

Delivery Information Please provide any delivery or parking information we need, such as a different shipping address. (500 characters, optional)

**Payment Terms** Our payment terms are 50% at time of order by credit card, and balance is due when your order is received. Any payment that is 7 days past due will be assessed a \$15 late fee plus 18% annual interest monthly. Please check this box to confirm you agree to these terms.

**Marketing Support**

**Please provide your website address, and your social media accounts if possible. We will add you to our website and promote your business on our social media accounts.**

**Website:**

**Instagram:**

**Facebook:**

*Remember to attach your company logo or an image we should use on our website and return along with this form.*

**Is there any additional information we need to best serve you? (500 characters, optional)**