



Customer Onboarding Form

Fill out form completely. If you have any questions, please ask your **UNIQUE** rep. Thank you.

Legal Name	<input type="text"/>	Tax ID	<input type="text"/>
Business Name (DBA)	<input type="text"/>		
Billing Address	Street <input type="text"/>		
	City <input type="text"/>	State <input type="text"/>	Zip <input type="text"/>
Shipping Location	<input type="checkbox"/> Same as Legal Name	Other	<input type="text"/>
Ship Attention To	<input type="checkbox"/> Receiver	Other	<input type="text"/>
Shipping Address	<input type="checkbox"/> Same as Billing Address	Other	<input type="text"/>
	City <input type="text"/>	State <input type="text"/>	Zip <input type="text"/>
Shipping Confirmation Email	<input type="checkbox"/> None	Email	<input type="text"/>
Terms	<input type="checkbox"/> 2% Net 10	Other	<input type="text"/>

Contact Information				
Department	First Name	Last Name	Phone #	Email
Accounting				
Sales				

Business References		
Business Name	Person to Contact	Phone Number



Customer On-Boarding Form

Notes:



1 (818) 280-6327



UniqueBev.com



4760 Preston Road, #244-115
Frisco, TX 75034