



**PIONEER  
PACKAGING**

## NEW CUSTOMER DATA SHEET

6006 SOUTH 228th STREET • KENT, WA 98032-1806  
(253) 872-9693 • (800)248-3269 • FAX: (253) 872-0803

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

**BILLING** Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**DELIVERY** Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Delivery / Receiving Contact Person: \_\_\_\_\_

Delivery Contact Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Delivery Contact Email: \_\_\_\_\_

Receiving Days of Week: \_\_\_\_\_ Hours Each Day: \_\_\_\_\_

Receiving Method (check all that apply): DOCK FORKLIFT PALLET JACK HAND UNLOAD

Do you have room for delivery by a 53 foot trailer? (Check one): YES NO

**PURCHASING** / Ordering Contact Person: \_\_\_\_\_

Purchasing Contact Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Purchasing Contact Email: \_\_\_\_\_

**ACCOUNTS PAYABLE** Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_

How do you receive billing? (Check one): EMAIL FAX

A/P Contact Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Does your company require Purchase Order numbers? (Check one): YES NO

Other information: \_\_\_\_\_

Please Print Legibly – Return via FAX to **PIONEER PACKAGING** with Credit Application  
or email to Accounting@pioneerwa.com.