



GTIGLOBAL NEW CUSTOMER INFORMATION FORM

Company Information

Company Name:

Date Established:

Primary Contact:

Phone Number:

Fax Number:

Email Address:

Website:

Tax ID/VAT Registration Number:

Company/Incorporation Number:

Tax Exempt (US ONLY): Yes No

Resale/Tax Exemption Certificate Number (US ONLY):

Billing Information

Bill to Address Line 1:

Bill to Address Line 2:

City:

State:

Zip/Post Code:

County:

Country:

Primary Bill to Contact:

Phone Number:

Email Address:

Payment Terms

- Customer may apply for credit terms by requesting and completing a credit application form
- Payment terms will be Due Upon Receipt/Direct Debit until the credit application has been reviewed and approved
- Request for credit application should be sent to: billing@gtivoice.com (US customers only)

Other Information/Additional Comments:

Completed By:

Phone Number:

Date:

GTI Internal Use

Entered By:

Date:

