



# Industrial Custom Products

## New Customer Credit Form

New Customer Name: \_\_\_\_\_  
New Customer Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
New Customer Phone: \_\_\_\_\_  
New Customer Fax: \_\_\_\_\_  
Customer A/P Contact: \_\_\_\_\_  
ICP Account Salesperson: \_\_\_\_\_  
**DUNS #** \_\_\_\_\_  
\_\_\_\_\_

**Bank** Name: \_\_\_\_\_  
Branch: \_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

## Credit References

**Vendor #1** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
\_\_\_\_\_

**Vendor #2** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
\_\_\_\_\_

**Vendor #3** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
\_\_\_\_\_

Please complete and fax to (612) 781-1144 - Attn: Accounting Department