



# Ed Fagan Incorporated

769 Susquehanna Avenue

Franklin Lakes, NJ 07417

TELEPHONE: 201 891 4003

FAX: 201 891 3207

www.edfagan.com

## NEW CUSTOMER INFORMATION FORM AND CREDIT APPLICATION

Ed Fagan Inc., would like to welcome you as a new customer. The PDF has three pages. The first page has instructions and a simple form to help us communicate with you via email. The second page is a credit application. The third page is our W9, which you need for your records.

## NEW ACCOUNT SETUP PROCEDURES

- Complete the Credit Application Form.
- Submit your Resale Certificate for our file.
- Email the completed form to [Grace@edfagan.com](mailto:Grace@edfagan.com) or fax to 201-425-9017.
- Standard credit terms are 1% 10 Net 30 for approved accounts.
- We accept payment by check, credit card, ACH or Wire.
- If paying by company check, remit to our New Jersey office address listed below.

Ed Fagan Incorporated  
769 Susquehanna Avenue  
Franklin Lakes, NJ 07417

We are happy to report that Ed Fagan Inc. is taking steps to become more earth-friendly. As part of our green efforts, we email invoices or statements. Please complete the simple form. If you require a hard copy mailing rather than email, please let us know and we will happily accommodate you.

Company Name

Company Address

Accounts Payable Contact

A/P Phone Number

*Email Addresses for Invoices*

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If you have any questions regarding your account, please contact Grace Johnson, Accounting Manager at 201-425-9034 or email [Grace@edfagan.com](mailto:Grace@edfagan.com).

Thank you for the opportunity to do business with your company.

BUSINESS CONTACT INFORMATION			
Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:	State:	ZIP Code:	
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:
BUSINESS AND CREDIT INFORMATION			
Primary business address:			
City:	State:	ZIP Code:	
How long at current address?			
Tax ID:		Re-Sale Certificate:	
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:	State:	ZIP Code:	
Type of account:	Account number:		
Savings			
Checking			
Other			
BUSINESS/TRADE REFERENCES			
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			

