

Account Set-Up Form

240 Anderson Avenue
Moonachie, NJ 07074
Tel: 201.617.2000
Fax: 201.617.2001
www.alu.com

***Customer to fill out:
Account Set-Up***

Billing Information

Company Name:	
Street:	
City, State, Zip:	
Telephone #:	Fax#
Contact Name:	Title:
Email Address:	
Accounts Payable Contact Name:	
Accounts Payable Phone #:	
Accounts Payable Email:	
Type of Business:	

Special Instructions: (PO's required, special shipping instructions, etc...)	
Resale Certificate Yes or No (if yes please send copy of form)	Date:
Email: myrna.colondres@alu.com	

For office use only.

Account Executive name: _____

Account number: _____