

NEW
CUSTOMER/VENDOR
FORM



The MAGNUM Companies, Ltd.

Brilliance is our Business

(check one)

New Vendor New Customer

Date _____

Name / Company Name _____

Contact Street Address _____

City _____ State _____ Zip _____ County _____

Contact _____ Phone _____

Fax _____ Email _____

.....
Billing info same as above

Name / Company Name _____

Billing Street Address _____

City _____ State _____ Zip _____ County _____

Accounting Contact _____ Phone _____

Fax _____ Email _____

.....
I DO NOT wish to receive MAGNUM's Monthly Mailing.
(MMM is a once-a-month email containing rental, sales & used equipment specials.)

I DO NOT wish to receive MAGNUM's Quarterly Newsletter.
(The Newsletter is a quarterly publication containing info about the happenings in and around the MAGNUM community.)

.....
NEW CUSTOMERS : *(check one)*

Please forward me information to open a credit account w/MAGNUM

Please make all my transactions COD

*If you are tax exempt please fax or email tax exemption form.

NEW VENDORS :

*Please FAX or EMAIL a complete W9 form.

EMAIL INFORMATION to: admin@magnumco.com

FAX INFORMATION to: The Magnum Companies, Ltd
Attn: ADMIN OFFICE
404.875.5629

205 Armour Dr. NE / Atlanta, GA 30324 / Tel 404.872.0553 / Fax 404.875.5629

www.magnumco.com