



Home of the *LEGENDARY* Customer Experience!

---

## New Customer Checklist

Net 30 Account

- Credit Application Form
- Hard copy of first Purchase Order
- Tax Exemption Form – *if Applicable*

---

Email completed information to [info@iidm.com](mailto:info@iidm.com)

For Customer Service or 24/7 Field Service:



**877-906-2100**



[info@iidm.com](mailto:info@iidm.com)



**214-574-9503**



**InnovativeIDM.com**



301 W. Vista Ridge Mall Drive, Suite 100  
 Lewisville, Texas 75067  
 877-906-2100

## CREDIT APPLICATION

**Standard Terms: Net 30**

Legal Name of Company	Federal Tax ID#	Years in Business
All DBA's	Main Number	Fax#
Billing Address	Shipping Address	
City, State, ZIP code	City, State, ZIP code	

- ★ Will this account be Tax Exempt? No Yes \*Please attached Exemption
- ★ Will a shipping account be used for purchases? No Yes

Please provide Shipping Agency & Account Number \_\_\_\_\_

### Contact for Accounts Payable

Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Preferred Invoice delivery method Email Fax Mail

Email address or Fax Number: \_\_\_\_\_

## AUTHORIZATION

**Standard Terms: Net 30**

To request Innovative- IDM to extend a line of credit for purchases under credit sales terms, I authorize Innovative-IDM to contact the references and banks listed below. I also understand that this information will be held in strict confidence and used solely for the consideration of extension of credit by us. By signing this application, you agree to our standard terms.

Signature (Authorized Signature Only)	Title	Date
---------------------------------------	-------	------

## TRADE REFERENCES

Name of Company	Address, City, State & ZIP	
Contact	Phone# or Fax#	Email Address
Name of Company	Address, City, State & ZIP	
Contact	Phone# or Fax#	Email Address
Name of Company	Address, City, State & ZIP	
Contact	Phone# or Fax#	Email Address

## BANK REFERENCE

Name of Bank	Contact	Email Address	
Street Address	City, State, ZIP	Phone#	Fax#