



Client Delivery Information

****Complete entire form, orders will not be shipped until information is received****

Customer:

Type of Business:

Ship To Address:	_____

Delivery Information

Appointment Required?	Yes	No
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Receiving Hours?	_____
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Closed for Lunch? (If yes, from when to when)	Yes	No
	_____	_____

Loading Dock?	Yes	No
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Forklift Available?	Yes	No
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Pallet Jack Available?	Yes	No
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Maximum Trailer Size this facility can accept?	_____
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Pallet Size Requirements:	_____
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Special Instructions:	_____

Initial Order Amount & Brief Description:	_____

Potential Annual Sales Volume & Description	_____
