



NEW CUSTOMER INFORMATION SHEET

Thank you for choosing Profile Food Ingredients, LLC for your blending/packaging needs. Please complete the information below and return with your credit application. Should you have any questions please feel free to contact our office or your sales representative.

Customer Name: _____

Customer Billing Address: _____

Customer Shipping Address: _____

Customer Contact: Name: _____
 Phone: _____
 Fax: _____
 Email: _____

Accounts Payable Contact Name: _____
 Phone: _____
 Fax: _____
 Email: _____

QA Contact: Name: _____
 Phone: _____
 Fax: _____
 Email: _____

In addition to the information above, please provide any special shipping, packaging, labeling or other requirements below (if applicable, please attach copies as necessary)

