



ReGo Trading
Wholesale Distributor

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Metuchen, NJ 08840
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Contact@ReGoTrading.com

NEW ACCOUNTS APPLICATION

COMPANY BILLING

Company Name		Type of Business: <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Franchise <input type="checkbox"/> Other _____
Contact Name		
Email Address		
Phone Number		
Fax Number		
Registered Company Address, City, State, ZIP		Nature of Business: <input type="checkbox"/> Wholesale <input type="checkbox"/> Pharmacy <input type="checkbox"/> Retail <input type="checkbox"/> Chain <input type="checkbox"/> Private Sellers <input type="checkbox"/> Supermarket <input type="checkbox"/> Other _____
Years in Business?		
Years at Present Location?		
Federal Tax-ID		

COMPANY SHIPPING

Facility/ Company Name		Receiving Name	
Receiving Company Address, City, State, ZIP		Primary Phone Number	
		Secondary Phone Number	
Email Address		Fax	

OWNERS/ PRINCIPALS/ ACCOUNTS PAYABLE IN COMPANY

Full Name	Title	Phone	Email

SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	