

BIAGI BROS., INC.

787 AIRPARK ROAD, NAPA, CA 94558

PHONE: (707) 256-2623 FAX: (707) 256-2674

CUSTOMER SETUP FORM

Thank you for choosing Biagi Bros., Inc. as your logistics company. We would like to make sure that we have all the necessary information in order to serve you accurately. **Please complete this form and return to our Credit Department via e-mail (rates@biagibros.com).** You may attach additional pages if needed. Brokers must submit bond and insurance carrier information. **Payment terms are net 30 days.**

DATE:

Years in Business:

Company Information

^^ Company Name ^^

^^ (Area Code) Phone Number ^^

^^ (Area Code) Fax Number, E-mail Address ^^

^^ Motor Carrier Number (If Applicable) ^^

^^ Trade Name ^^

^^ Legal Name If Different ^^

^^ Complete Address (Street # and /or P.O. Box, City, State, Zip Code ^^

^^ Party Responsible For Approving Payment of Freight or Warehousing Charges ^^

^^ (Area Code) Phone/Fax Number ^^

^^ Billing Address For Payment Charges ^^

^^ Accounts Payable Contact Name & E-mail Address ^^

^^ (Area Code) Phone/Fax Number ^^

Name(s) of Principal(s)

^^ (Area Code) Phone Number ^^

^^ Federal Tax I.D. # or SSN ^^

^^ Bonded Winery # (If Applicable) ^^

Credit References (Attach additional pages if necessary)

^^ Bank Name & Address ^^

^^ Bank Contact Name & Phone Number ^^

^^ Bank Account Number ^^

^^ DUNS Number ^^

Please list three vendors in which you currently do business (please provide company name, address, contact name, phone number and fax number.)

1.)

2.) _____

3.) _____

Payment Options (Please specify)

Check Payment: address at top of page

ACH Payment: _____

^^ Contact Name to set up ACH payments ^^

^^ (Area Code) Phone & Fax Number ^^

Billing Options: (Please specify)

Paper Invoices Sent Via U.S.Mail

Electronic Invoices Sent Via EDI Format

^^IT or EDI Contact Name ^^

^^ (Area Code) Phone/ Fax Number ^^

^^ E-mail Address ^^

Note: If your company requires any special billing exceptions, such as certain number on your invoice that is not a bill of lading or purchase order number, please notify us on this form:

^^ Signature ^^

^^ Title ^^

^^ Date ^^

FOR OFFICE USE ONLY
V.O.B. _____