

DOUBLE THE PANE®

INSULITE, INC.

Manufacturers of Insulating Glass

DOUBLE THE PANE®

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TOMS RIVER, NJ 08753-1407
www.doublethepane.com

CUSTOMER INFORMATION SHEET

COMPANY NAME _____

PHONE (____) _____ - _____ 2nd PHONE (____) _____ - _____

FAX (____) _____ - _____ EMAIL _____

BILLING ADDRESS

STREET _____

CITY _____ STATE _____ ZIP _____

SHIPPING ADDRESS (if different from above)

STREET _____

CITY _____ STATE _____ ZIP _____

CONTACT

PERSON _____

Circle one: *Pick Up* *North Delivery* *South Delivery* *West Delivery*

Is a P.O. required? *Yes* *No*

STATE SALES TAX NUMBER (ST-3#) _____

(Must submit/fax complete ST-3 Form for No Tax status.)

BUSINESS BANK NAME _____ **ACCOUNT #** _____

NAME AND PHONE OF 3 COMMERCIAL ACCOUNT REFERENCES:

OWNER'S FULL NAME _____

OWNER'S HOME ADDRESS

STREET _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____ - _____ DRIVER'S LICENSE # _____