



CUSTOMER CONTACT FORM

2604 Tunbridge Lane, St Augustine FL 32092, Ph (833)668 6228, admin@motobatt.us

Company Contact Form

BILL TO INFORMATION	
Company name:	
Address:	
Telephone number:	
Fax number:	
Date business started:	
Web Site:	
FEIN NUMBER	
SHIP TO INFORMATION	
Company name:	
Street Address:	
City:	
State:	
Postal Zip Code:	
FREIGHT METHOD	
OWN FREIGHT ACCOUNT	
OWNER INFORMATION	
Owner name:	
Email Address:	
Telephone number:	
Fax number:	
PURCHASING INFORMATION	
Purchasing Manager:	
Purchasing Contact:	
Email Address:	
Telephone number:	
Fax Number:	

SALES TEAM	
Sales Manager:	
Email Address:	
Telephone number:	
Fax number:	
Notes:	
ACCOUNTS PAYABLE INFORMATION	
AP Manager name:	
Email Address:	
Telephone number:	
Fax number:	
Notes:	
SHIPPING DEPARTMENT INFORMATION	
Shipping Contact:	
Email Address:	
Telephone number:	
Fax number:	
WARRANTY DEPARTMENT INFORMATION	
Warranty Contact:	
Email Address:	
Telephone number:	
Fax number:	
FREIGHT FORWARDER INFORMATION	
Freight Forwarder Company Name:	
Address:	
Contact Name:	
Telephone number:	
Email Address:	
CATALOG DEPARTMENT INFORMATION	
Catalog Contact:	
Email Address:	
Telephone number:	

ACCESSORIES/SPARES DEPARTMENT INFORMATION	
Accessories Contact:	
Email Address:	
Telephone number:	
Spares Contact:	
Telephone number:	