



LOUISBURG
CIDER MILL

NEW ACCOUNT FORM

Louisburg Cider Mill
14730 K68 Hwy
Louisburg, Kansas 66053
913-285-5300

Date: _____

Registered Name: _____

DBA: _____

FEIN _____

Resale ID: _____ State: _____

Address: _____

City: _____ State: _____ Zip: _____

****Please include a copy of your tax exempt certificate when returning this completed form.**

DELIVERY

We offer free delivery within the KC metro area for orders \$100.00 or more.

How would you like your order delivered?

Local Delivery UPS Pick Up LTL

Shipping/Delivery Address:

All deliveries must be inspected and signed for. Any damages or incorrect quantities must be noted on the delivery BOL. A signature with no discrepancies is stating that shipment was received in good order.

**If there are multiple delivery addresses, please attach a separate sheet.

BILLING

Please provide a name and email address to send invoices and statements to.

Contact Name: _____

Phone Number: _____

Email Address: _____

TERMS

New customers are required to pay for their order before the order is shipped/delivered. After history is established between LCM and customer, LCM will issue net terms as they see fit. LCM will also

have the right to revoke net terms if customers cannot pay their bill in a timely manner.

I am interested

NOT interested

in net terms.

Credit Card Information

Name on card: _____

CC#: _____

Exp. Date: _____ CVV: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

There will be a 3% convenience fee applied to all credit card purchases. By signing, you authorize LCM to charge future orders to this card. LCM will email customer invoice prior to billing the credit card.

Authorized Signature: _____ Date _____

Print Name: _____