



New Customer Information Sheet:

FLEET NAME: _____
EXAMPLE: TOWN OF MILFORD

DEPARTMENT NAME: _____
EXAMPLE: TOWN OF MILFORD PUBLIC WORKS

ADDRESS: _____

ADDRESS 2: _____

CITY: _____

STATE: _____ ***ZIP:*** _____

CONTACT NAME: _____

PHONE NUMBER: _____ - _____

FAX NUMBER: _____ - _____

***BUSINESS E-MAIL ADDRESS
FOR INVOICES:*** _____

FOR OFFICE USE ONLY:

FLEET NUMBER: _____

DEPARTMENT NUMBER: _____