



BLUE OCEAN T R A D E R S

1455 South 7th Street, Louisville, KY 40208

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NEW CUSTOMER CREDENTIALS FORM

1 Company & Billing Information

Company Name :	
Contact Name/Title :	
Address { line 1 } :	
Address { line 2 } :	
City/State/Zip Code :	
Phone :	Fax :
Email :	
Site :	

2 Shipping Information

Ship to { storefront / warehouse / building } :	
Address :	
City/State/Zip Code :	
Contact Person :	
Phone :	Fax :
Email :	
Receiving Hours { day / time }	Do you require liftgate truck? { please circle } - No Yes { extra charges }
Additional Shipping Instruction :	

3 Broker Information for overseas customer

Broker Company	
Contact Name :	
Phone / Fax :	Fax :
Email :	

4 Submit this form together with **SALE & USE TAX CERTIFICATE** {required} to our Sales Office via email - info@blueoceantraders.com, or fax - 502 637 1841.