



Serving The Marine Industry with Quality Products Since 1947

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### NEW ACCOUNT FORM

Company Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Ship To Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business Established: \_\_\_\_\_ Business Nature: \_\_\_\_\_

Business Type:  Corporation  Partnership  Single Proprietorship

Division of: \_\_\_\_\_ Sub of: \_\_\_\_\_

Officers of the Company: (Include complete name and title)

Full Name	Position/Title
	Accounts Payable Manager
	Sales Manager
	Purchasing Agent
	Chief Engineer (OEM Only)

### TRADE REFERENCES

Company Name	Address	Phone#	Fax#	Email

### BANK REFERENCES

Bank Contact Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Will Accept Initial Order C.O.D (Cash on Delivery)?:  Yes  No

Completed by: Your Name: \_\_\_\_\_ Your Title: \_\_\_\_\_ Date: \_\_\_\_\_

