



**SHIPPING CUSTOMER INFORMATION page3**

Company or Restaurant Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_

Regular Close Day: \_\_\_\_\_

**About your Order:**

Name of Purchaser/Chef

\_\_\_\_\_

*(Please list all names if more than one)*

Phone No.(Morning Contact) \_\_\_\_\_

Alternate Phone No.(\_\_\_\_\_) \_\_\_\_\_ (Cell /page/ home)

Fax Number(\_\_\_\_\_) \_\_\_\_\_

**About your Shipment:**

What is the name of the nearest airport from your location? \_\_\_\_\_

What air cargo company do you prefer ? \_\_\_\_\_

Will you be picking up the shipment your self? Yes No

Will you be requiring door to door service (fee is usually about \$40 to \$60)? Yes No

Do you have an account number with the air cargo company ? Yes No

If yes, please provide the account number \_\_\_\_\_ Company \_\_\_\_\_

Name of account holder \_\_\_\_\_

Will you be picking up the shipment at the Air Cargo Facility? Yes No

\_\_\_\_\_

Special Request to IMP \_\_\_\_\_

\_\_\_\_\_