



Mailing Address:  
PO Box 29  
Bargersville, IN 46106

Physical Address:  
435 E. Main St, Suite 150  
Greenwood, IN 46143

Dispatch 317-522-2555  
dispatch@g5logistics.com  
Fax 317-522-2556

### New Customer Data Form

Company Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Street Address

City State Zip Code Phone Emergency Phone

Caller: \_\_\_\_\_

Name Position Phone Cell

Caller: \_\_\_\_\_

Name Position Phone Cell

Caller: \_\_\_\_\_

Name Position Phone Cell

Accounts Payable Address: \_\_\_\_\_

Same as above:

City State Zip Code Phone

A/P Contact: \_\_\_\_\_

Name Position Phone Cell

Normal Business Hours:	Open	Close
Weekdays	_____	_____
Saturday	_____	_____
Sunday	_____	_____

Is there anything else we need to know? \_\_\_\_\_

Will we need reference PO numbers? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_