



Toll Free Phone: (866) 412-6726  
www.HomeDepotPro.com/Institutional  
Email to: [uscadmin@interlinebrands.com](mailto:uscadmin@interlinebrands.com)

OMNIA  
PARTNERS

### NEW CUSTOMER FORM

LEGAL BUSINESS NAME OF APPLICANT: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ PCARD OR CREDIT CARD: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COUNTY: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_ BUSINESS FAX: \_\_\_\_\_

SALES TAX EXEMPT:  YES  NO (IF YES, EXEMPTION CERTIFICATE MUST BE ATTACHED)

CREDIT LINE REQUESTED: \_\_\_\_\_ ESTIMATED MONTHLY PURCHASES: \_\_\_\_\_

PURCHASE ORDER REQUIRED:  YES  NO FEDERAL TAX ID#: \_\_\_\_\_

A/P CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

SALES CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

ADDITIONAL SHIP-TO'S:  YES  NO

STREET ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DELIVERY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

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#### INTERNAL USE ONLY

BRANCH: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_ SALES REP#: \_\_\_\_\_

SIC CODE: \_\_\_\_\_ D&B: \_\_\_\_\_ CREDIT LINE: \_\_\_\_\_

**ALL NEW ACCOUNTS WILL BE ESTABLISHED WITHIN 24-48 HOURS**