

**VISMINT ADVENT TRADERS, INC. (VMAT, Inc.)**

(Advent Traders Center) Gochan Compound, MJ Cuenco, Mabolo, Cebu City

**CUSTOMER BASIC DATA**

Trade Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Tel. # \_\_\_\_\_

\*\*\*please attach separate paper with sketch

Store Name (if different): \_\_\_\_\_ Fax # \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email Address: \_\_\_\_\_ Cel. # \_\_\_\_\_

Tin No. \_\_\_\_\_ Type of Business: ( ) Sole Proprietor ( ) Partnership ( ) Corporation

Store Classification: (Retail)

( ) Supermarket ( ) Grocery ( ) Sari Sari ( ) Market Stall ( ) Drug Store

( ) Convenience Store ( ) Wholesaler/Sub D

Outlet Classification: (Food Service)

( ) Bakery Store ( ) Local Eatery ( ) Restaurant ( ) Coffee Shop ( ) Bars / Nightclub

( ) Food stall/Fast Food ( ) Food court ( ) Convenience Store ( ) Hotels ( ) Caterers

( ) Canteens ( ) Sports/Country Club ( ) Shipping Line ( ) Wholesaler ( ) Manufacturing

( ) Others: \_\_\_\_\_

**\*OWNER'S INFORMATION:**

Name: \_\_\_\_\_ Tel. # (Res) \_\_\_\_\_

Address (Residence): \_\_\_\_\_ Cel. # \_\_\_\_\_

Birthday: \_\_\_\_\_ Specimen Signature: \_\_\_\_\_

**\*Person Authorized to Purchase / Sign Purchase Order (different from Owner):**

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Cel. #: \_\_\_\_\_ Birthday: \_\_\_\_\_ Signature: \_\_\_\_\_

Purchase Limit: Php \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Cel. #: \_\_\_\_\_ Birthday: \_\_\_\_\_ Signature: \_\_\_\_\_

Purchase Limit: Php \_\_\_\_\_

Authorized Payment Mode: ( ) CASH Only ( ) CHECK Only - w/Credit Application approved.

**\*BANK INFORMATION (if check paying customer):**

Account Name: \_\_\_\_\_ Account No. \_\_\_\_\_

Bank / Branch: \_\_\_\_\_ Authorized Signatories: \_\_\_\_\_

Account Name: \_\_\_\_\_ Account No. \_\_\_\_\_

Bank / Branch: \_\_\_\_\_ Authorized Signatories: \_\_\_\_\_

*We confirm that all information stated above are true and accurate.*

Signed:

\_\_\_\_\_  
Signature over Printed Name

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature over Printed Name

Date: \_\_\_\_\_

\*\*\*DO NOT FILL UP, for VMAT use only.

DATE: \_\_\_\_\_

CREDIT LIMIT: PHP \_\_\_\_\_ APPROVED TRADING TERM: \_\_\_\_\_

DIVISION: \_\_\_\_\_ SALES DISTRICT: \_\_\_\_\_

Remarks: \_\_\_\_\_

Signed:

\_\_\_\_\_  
Sales Personnel

\_\_\_\_\_  
DSOM

\_\_\_\_\_  
Finance/Admin. Head

\_\_\_\_\_  
Approving Officer