



# New Account Information

THIS SECTION FOR INTERNAL USE ONLY

CASE NO:

COMPANY ID:

**YOUR COMPANY INFORMATION** *Please note: Required fields are indicated with an asteriks (\*).*

OFFICER'S NAME\*:

TITLE\*:

OFFICER'S NAME\*:

TITLE\*:

COMPANY NAME\*:

ADDRESS\*:

CITY\*:

STATE\*:

ZIP CODE\*:

COMPANY PHONE NUMBER\*:

COMPANY FAX NUMBER\*:

RESALE TAX CERTIFICATE NUMBER (US CUSTOMERS\*):

**REQUIRED FOR US CUSTOMERS**

A copy of your Resale Tax Certificate is required. It must be on file or we cannot process your orders. **Please send it via our secure fax line (781) 535-5095.**

ACCOUNTING CONTACT NAME\*:

EMAIL ADDRESS\*:

PHONE\*:

ADDITIONAL EMAIL ADDRESSES

INVOICES:

SALES ORDER ACKNOWLEDGEMENTS:

SHIPPING NOTIFICATIONS:

CONTACT'S NAME FOR MARKETING/PROMO EMAILS:

EMAIL ADDRESS:

ASI:

PPAI / PPPC:

SAGE:

BUYING GROUP/PARENT COMPANY IF APPLICABLE:

**DO NOT DELAY  
YOUR ORDERS >>**

**EMAIL**

**RETURN BY EMAIL TO AR@HUBPEN.COM**

- New Account Information
- Application for Credit
- Resale Tax Certificate\* (required for US customers)

**FAX**

**FAX TO OUR SECURE LINE (781) 535-5095**

- Credit Card Authorization
- Please note: Hub cannot accept this form via email. It must be submitted via our secure fax line (781) 535-5095.*

**ADDRESS**  
1525 Washington Street  
Braintree, MA 02184

**ORDERS & ARTWORK**  
hub@hubpen.com

**PHONE (781) 535-5500**  
**CUSTOMER CARE (800) 388-2323**  
**FAX (781) 535-5555**

**WEBSITES**  
hubpen.com  
hubpen.ca