



5757 Clay Ave SW
Wyoming, MI 49548
Phone: (616) 538-4305
Fax: (616) 538-1186

Chris McFarlane - Controller
cmcfarlane@westwalkersteel.com

Please use this checklist to help expedite the setup process.
Should you have any questions, please feel free to contact me.

NEW CUSTOMER CHECKLIST

First of all, thank you for your interest in West Walker Steel. This checklist will help us to be a better supplier by gathering needed information about your company, and providing you with information about your account terms.

Business Information - Fill in the company information below.

Company Name: _____

DBA Name (if applicable): _____

Employer/Fed. Tax ID Number: _____

Physical Address: _____

Date Established: _____

City/State/Zip: _____

In the city limits? Yes No

County: _____

Type of Company: Individual Corp. Partnership

Mailing Address (if different): _____

Business Phone: _____

City/State/Zip: _____

Business Fax: _____

Contact Name: _____

If your company is a subsidiary or division of another entity,
please indicate the name and relationship:

Job Title: _____

Phone: _____

Fax: _____

Email: _____

Below is a checklist of items we will need to complete the setup process:

- Complete the business information section above.
- Sales Tax and Use Certificate.
- Complete the Application for Credit.

Again, thank you for your interest in West Walker Steel. We look forward to doing business with you.