



ATTENTION NEW CUSTOMERS: Orders must be prepaid: wire, credit card or certified check.  
After six months, a Credit Application may be submitted for review.

**MAC USERS:** Be sure to download & save. Using preview to complete breaks functionality.

The following information is required:

Company Name:	Date:	
Billing Address:	City:	State:
	Zip Code:	Country:
Shipping Address:	City:	State:
	Zip Code:	Country:
Phone:	Fax:	
E-mail:	Website:	

#### Sales and Use Tax

Are purchases for resale?      No      Yes      If yes, please provide resale certificate number and current copy.

Certificate Number: \_\_\_\_\_

#### Contact Information

Purchasing (PCH):	Phone:
	Email: _____
Accounting (A/P):	Phone:
	Email: _____
Flammability (FLA) (Optional) :	Phone:
	Email: _____
Interior Shop (INT) (Optional) :	Phone:
	Email: _____

#### So that we may provide you with better service...

The following information is optional:

How did you hear about Skandia?

Online      E-commerce      Previous Customer  
Referral      If referral, who?  
Trade Show: Aircraft Interiors (Hamburg)      Ebace      NBAA  
Other: \_\_\_\_\_

What products and/or services are you interested in:

Acoustics      Foam Products      Upholstery Supplies  
Flammability Testing Services      Foam Fabrication Seating Programs  
Other: \_\_\_\_\_

Would you like a catalog filled with samples and technical data shipped with your order?

No      Yes

What type of work do you generally perform?

General Aviation      Upholstery/Interiors      Airframe/Heavy Maintenance      Charter Operator  
Other: \_\_\_\_\_

#### For Internal Use Only

Sales Representative \_\_\_\_\_  
Payment Method \_\_\_\_\_