



## New Poop Bags Commercial Account Form

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**Business Name** | \_\_\_\_\_

**Contact Name** | \_\_\_\_\_

**Business Street Address** | \_\_\_\_\_

**City, State Zip Code** | \_\_\_\_\_

**Email Address** | \_\_\_\_\_

**Phone Number** | \_\_\_\_\_

**Fax Number** | \_\_\_\_\_

**Web Address** | \_\_\_\_\_

**State** | \_\_\_\_\_

**Business License** | \_\_\_\_\_

**Federal Tax Identification Number** | \_\_\_\_\_

Please fax, mail or e-mail completed form with a copy of your State Business License. Upon receipt, PoopBags will issue you a username and password to order.

**Address** | 3759 N. Ravenswood Ave. Unit 135B, Chicago, Ill. 60613 **Phone** | 773.929.7667

**Email** | customerservice@poopbags.com **Fax** | 866.838.6964

