|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  | 2500 Evergreen Ave |
|  |  |  |  |  |  | Jacksonville, FL 32206 |
|  |  |  |  |  |  | (904) 353-3694 |
|  |  |  |  |  |  | www.bermanbros.com |
|  |  |  |  |  |  |  |
| SCRAP CUSTOMER PROFILE | | | | | | |
|  |  |  |  |  |  |  |

Please complete and send back to us via recycling@bermanbros.com. Thankyou!

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| NAME |  |  |  |  |  |  |
|  | dba |  |  |  |  |  |
| Industry | |  |  |  |  |  |
| Mailing Address | |  |  |  |  |  |
| Phone# |  |  |  |  | Fax# |  |
| Scrap Pickup Location (if differs from above) | | | | |  |  |
|  | Contact at Scrap Pickup Location | | | |  |  |
|  |  | Phone# |  |  |  |  |
|  |  | Email |  |  |  |  |
|  | Accounts Receivable Contact | | | |  |  |
|  |  | Phone# |  |  |  |  |
|  |  | Email |  |  |  |  |
| Payment Preference: | | |  |  |  |  |
| Cash ($1000 Maximum), please list authorized recipients | | | | | |  |
|  |  |  |  |  |  |  |
| Checks - payable to: | | |  |  |  |  |
| Authorization for ACH: | | |  |  |  |  |
|  | Financial Instruction: | |  |  |  |  |
|  | Routing Number: | |  |  |  |  |
|  | Account Number: | |  |  |  |  |
|  | Email for Payment Notification: | | | |  |  |
|  |  |  |  |  |  |  |
| This authorization will remain in effect until Berman Brothers receives written notification from me changing bank information, cancelling ACH service or Berman Brothers discontinues or changes ACH service. I shall send changes request to this service and understand it make take 14 days for this change to take effect. | | | | | | |
|
|  |  |  |  |  |  |  |
| A signature below acknowledges understanding of and adherence to all pertinent statutes and regulations for Restricted Regulated Metals Property, identified in Sec 185.502. (h) of ordinance 2011-766-E and Florida Statute 538.26 (please see our website for links to ordinance and statute). | | | | | | |
|
|  |  |  |  |  |  |  |
| Authorized Signature & Date | | | |  |  |  |
| Printed Name & Title | | |  |  |  |  |
| Email Address & Phone Number | | | |  |  |  |
|  | | | | | | |