

# New Account Profile

<b>Cust. ID</b>	_____
<b>Rep ID</b>	_____
<b>Date Opened</b> <i>(1st Order Received)</i>	_____

**CUSTOMER SERVICE: Please complete all blue areas.**  
(Applies to corporate leads only)

<b>SOURCE</b>	<b>Corporate Lead*</b>	<b>Sales Rep Lead</b>
	<input type="checkbox"/> Corporate Pool (HA)	<input type="checkbox"/> Call / Visit
	<input type="checkbox"/> Customer Internet Inquiry	<input type="checkbox"/> Rep Internet Request
	<input type="checkbox"/> Call to Customer Service	<input type="checkbox"/> Show _____
<b>CSR:</b> _____		<i>Specify show above</i>

<b>KEY DATES</b>	<b>Corporate received inquiry</b> _____
	<b>Corporate sent request to Rep</b> _____
	<b>Rep replied to corporate</b> _____
	<b>Forwarded to TMktg. (if applicable)</b> _____
	<b>Account protection expires</b> _____
<b>REP</b>	<b>Rep's 1st call to account</b> _____
	<b>1st Store Visit</b> _____

<b>BILLING ACCOUNT INFORMATION</b>	Store Name _____	Store Phone _____	Fax _____	
	Address _____	E-mail(s) _____		
	Address _____	Store website _____		
	City / State / Zip _____	DIB# _____	EIN# _____	
	Telephone 1 _____	Owner _____	Email _____	
	Telephone 2 _____	Buyer _____	Email _____	
	Telephone 3 _____	A/P _____	Email _____	
	Telephone 4 _____	Price Contact _____	Email _____	
	Annual Resale Certificate for Sales Tax # _____		*Please attach a copy of the Resale Certificate	
	<b>Would you like Paperless Invoicing (PPL)?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO			

<b>SHIPPING INFO</b>	Store Name _____	Phone _____
	Address _____	Fax _____
	City, State, Zip _____	E-mail _____
	<input type="checkbox"/> UPS <input type="checkbox"/> Fed Ex <input type="checkbox"/> Freight Forwarder # _____	Shipping Acct#: _____

<b>STORE PROFILE</b>	<b>1</b> Have you ever been contacted by a Spring Footwear Representative? <input type="checkbox"/> NO <input type="checkbox"/> YES _____ Name _____ Date _____	<b>8</b> Gender of your store products <input type="checkbox"/> Men's <input type="checkbox"/> All <input type="checkbox"/> Women's <input type="checkbox"/> Kids	<b>9</b> Store Type (Select all that apply) <input type="checkbox"/> Fashion/Boutique Store <input type="checkbox"/> Internet only <input type="checkbox"/> Comfort <input type="checkbox"/> Orthopedic Store <input type="checkbox"/> Uniform <input type="checkbox"/> Mail Order Catalog
	<b>2</b> How did you hear about Spring Footwear? _____	<b>10</b> Please list the best selling lines that your store carries. a _____ c _____ b _____ d _____	<b>11</b> Price Category <input type="checkbox"/> High End <input type="checkbox"/> Moderate <input type="checkbox"/> Popular Price <input type="checkbox"/> Discount
	<b>3</b> How long has your store been in business? _____	<b>12</b> Are you interested in drop-ship business with Spring Footwear? <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>13</b> Please list all your online distribution channels - website, Amazon ASIN, Ebay, other _____
	<b>4</b> What is your store's square footage? _____	<b>14</b> Additional information about this store: _____	
	<b>5</b> How many stores do you have? _____ If more than one location, please list other locations: _____		
	<b>6</b> What is your return policy? _____		
	<b>7</b> E-mail 2 photos of the store (one interior & one exterior) to leads@springfootwear.com.		

\* Please list trade shows attended \_\_\_\_\_

\*\* Please provide Spring Footwear Supplier Number (if applicable) \_\_\_\_\_

\*\* Sales Rep action required **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

- Contact customer within 5 business days
- Note details of your visit in conversation log
- All opening orders must be accompanied by new account form, credit application, authorized reseller agreement and any special shipping/account instructions
- E-mail completed new account profile to leads@springfootwear.com