



Olefins and NGL Customer Profile Information

Please complete the following information for each customer sold-to and ship-to location.

General Business Information

Sold to: _____ _____	Ship to: _____ _____
County (for U.S. customer): _____	

Contact Information (include at least one contact at the ship to location)

Contact Name		Contact Name	
Title/responsibility		Title/responsibility	
Phone		Phone	
Fax/Telex		Fax/Telex	
email		email	
Contact Name		Contact Name	
Title/responsibility		Title/responsibility	
Phone		Phone	
Fax/Telex		Fax/Telex	
email		email	

Chevron Phillips Commercial Representative	
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Documentation Requirements

Please indicate documents required by the customer, the number of copies, the media used to receive the document (fax, email, misc) and the recipient of the document. If special requirements are indicated, please attach a copy with details.

Documents	Req'd (Y/N)	#copies	Media	Recipient(s) & fax or email
Material Safety Data Sheet	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Bill of Lading	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Invoice	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Certificate of Analysis-standard	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Special COA Requirements				

Billing / Invoice Information

Sales Tax Exemption #:

* Certificate must be faxed to the CPCChem Tax Dept. at 832-813-6062 before order placement * (A sales tax exemption number is needed for each Ship-to location)

Special Invoice Requirements:

Delivery Information

Delivery Terms		
	Primary	Secondary
Transportation Mode		

RAIL CUSTOMER:

Delivering Carrier:

Rail Siding Name:

Can more than one railroad deliver to your facility? No , Yes If so, what other railroad(s) can access/deliver to your facility? _____**TRUCK CUSTOMER:**Days delivery required/accepted: Mon, Tues, Wed, Thurs, Fri, Sat, Sun

Delivery Hours: _____

Delivery equipment requirements: (i.e. pumps, extra hoses, tank capacity, access, seals, etc.)

Special delivery Instructions: _____

PIPELINE CUSTOMER:

Pressure requirements:

Min and Max hourly rates:

Special delivery instructions: _____

Product Information*For each product purchased from Chevron Phillips, indicate preference/requirements:*

Product Description (Chevron Phillips)	
Labeling/Marking Instructions	
Additional product requirements	

Product Stewardship

Does your Company have a written Environment, Health, Safety, and Security management system? _____
If no, please complete the **Product Stewardship Questionnaire** available from your Chevron Phillips Commercial Representative.

If yes, is the EHS management system tied to an Industry standard management system (i.e. Responsible Care®, ChemSteward®, ISO 14001)? _____

Name the EHS management system your company has committed to. _____

Do you intend to register this product for REACH? : _____

Does your Company physically receive the Product? : _____

Product end use: _____

Service Providers

Freight Forwarders Special Instructions: _____

Inspection Companies: _____

Additional Profile Information
