

Acquisition Notification

We have recently been notified that your company is in the process of acquiring facilities from a Joerns customer. The information below is required to process the acquisition accurately in our system.

To be completed by new owner:

We have an alternate provider and will need to schedule a pickup of all Joerns rental products.

We are interested in continuing to partner with Joerns as a provider.

*Please complete the attached credit application and return to credit-clt@joerns.com

ACQUISITION DATE (mm/dd/yyyy)			
NEW OWNER NAME			
NEW OWNER ADDRESS AND PHONE NUMBER	STREET	PHONE	
	CITY	STATE	ZIP
RESPONSIBLE FOR PAYMENT OF BILLED SERVICES STARTING			
ACCOUNTS PAYABLE CONTACT			
INVOICE METHOD			
INVOICE RECIPIENT			
GPO MEMBER (yes/no)		IF YES, GPO NAME:	

Please provide a list of facilities included in the acquisition and if the facility is/will be under a New Name (please attach a separate piece of paper if more space is needed).

*To provide a more accurate quote for continued services, please attach a list of all additional facilities owned by your corporation.

FACILITY NAME AND ADDRESS	FACILITY NEW NAME (if applicable)	FACILITY PHONE NUMBER

SUBMIT FORM	
FOR INTERNAL USE ONLY: CONTRACT ON FILE:	ACCOUNT NUMBER:
GPO:	GPO NAME: