

Business Information

Business Legal Name _____

Trade Name _____

Mailing Address _____ City, State, Zip _____

Shipping Address _____ City, State, Zip _____

Work Phone _____ Fax _____

E-Mail _____

Company Type: Corporation, what state _____ LLC Proprietorship Partnership

Name of Owners, Officers or Partners:

1. Name _____ Title _____

2. Name _____ Title _____

Contact Name _____

Mobile Phone _____ E-Mail _____

Type of Firm: Residential Designer Architect Contract Purchasing Agent
 Other _____

Sales Tax Exemption

No Exemption Certificate. We hold no exemption certificate and should be charged all applicable taxes.

Resale Certificate. We certify that we hold a valid resale tax certificate number _____ for the State of _____ . We are in the business of wholesaling, retailing, manufacturing or leasing. Our purchases from you of (describe products) _____ are for wholesale or resale or are ingredients or components of a new product to be resold, leased, or rented in the normal course of business. We further certify that if any property so purchased tax free is used or consumed by us making it subject to a Sales or Use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform you for added billing. This certification shall be a part of each order which we may hereafter give you, unless otherwise specified, and shall be valid until cancelled by us in writing or revoked by the city or state. We also agree to reimburse you for any sales tax later determined by Clarence House to be due and payable.

Exemption Certificate. We certify that we are a tax-exempt entity (church, school, government agency, etc.) holding exemption certificate number _____ for the State of _____ .

Please attach a copy of your resale exemption certificate.

U.S. Trade References

	Company Name	Phone Number
1.	_____	_____
2.	_____	_____
3.	_____	_____

Terms and Conditions

We agree that the standard terms of sale for Clarence House will be net 30 days from date of invoice and that shipments will be held if our account becomes delinquent. All orders are subject to credit approval when received. A service charge of 1½% per month will be charged on balances not paid within terms. In the event of default in payment, we agree to pay all collection fees, court costs, attorney fees and interest incurred through collection procedures. We understand that the information included in this application is for the use of Clarence House in determining the amount and conditions of credit to be extended. We certify that the information is correct. We authorize Clarence House or its agents to investigate our credit references and report our credit performance to the proper persons and credit bureaus.

Owner or Officer's Signature _____ Title _____ Date _____