



## ACCOUNT CREDIT INFORMATION

AK Floors | Email: [info@akfloors.com](mailto:info@akfloors.com)  
 Application must be completed & signed in its entirety to process. Email to serve as original.

### COMPANY INFORMATION:

Legal Name: \_\_\_\_\_ Corp. Proprietorship Partnership LLC LLP  
 DBA: \_\_\_\_\_ FEDERAL ID#: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ IF INCORPORATED, STATE OF INCORPORATION: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ YEAR BUSINESS STARTED: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 ARE YOU A MEMBER OF A BUYING GROUP? \_\_\_\_\_ IF YES, PROVIDE NAME: \_\_\_\_\_

### OWNER / PRINCIPAL INFORMATION:

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_  
 HOME ADDRESS: \_\_\_\_\_ HOME ADDRESS: \_\_\_\_\_  
 CITY/STATE/ZIP: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 ACCOUNTS PAYABLE CONTACT NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### SHIPPING PREFERENCE:

FREIGHT LINE OR ROUTING REQUESTED:  
 PREPAID & ADD COLLECT 3RD PARTY - MUST HAVE AN ACCOUNT WITH THE REQUESTED FREIGHT LINE

### PAYMENT TERMS:

PREPAY / CBD: \_\_\_\_\_ If CBD, Bank and Trade References are not required.  
 CREDIT LINE: \_\_\_\_\_ If Credit Line Requested, please indicate requested amount \_\_\_\_\_, and provide Bank & Trade References below.

IS YOUR BUSINESS TAX EXEMPT?  YES  NO If yes, enclosed Tax Exemption Form must be returned with this form.

### BANK REFERENCE:

ACCT#:

ADDRESS \_\_\_\_\_ CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ FAX \_\_\_\_\_

### TRADE REFERENCES – 2 MAJOR SUPPLIERS

COMPANY NAME	ADDRESS	CONTACT	PHONE	EMAIL	FAX	ACCOUNT
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FINANCIAL STATEMENT: ENCLOSED. IF NOT ENCLOSED, ADVISE DATE AVAILABLE:

**LIABILITY FOR ATTORNEY'S FEES & COLLECTION EXPENSES:** The Buyer agrees to pay all reasonable costs & out of pocket expenses of Seller enforcing or collecting the purchase price or other obligations created hereby or hereinafter arising in faor of Seller (including without limitation, collection agency fees & expenses, if applicant defaults on any payment due to Seller & reasonable attorney's fees & expenses of Seller's counsel if Seller is the prevailing party in any legal action).

**ALL FIELDS MUST BE COMPLETE & APPLICATION SIGNED BY AUTHORIZED PERSONNEL. PERMISSION IS HEREWITH GRANTED TO LEXMARK TO OBTAIN CREDIT INFORMATION FROM ALL VENDORS & BANK REFERENCES. THE FINANCIAL INFORMATION SUBMITTED IN SUPPORT OF THIS ACCOUNT IS TRUE & COMPLETE IN ALL RESPECTS. ALL INFORMATION will be kept in strict confidence.**

PRINT NAME: \_\_\_\_\_ AUTHORIZED SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

**AK Floors SALESPERSON:** \_\_\_\_\_ *Please email completed form to your AK Floors Salesperson.*

**FOR INTERNAL USE ONLY (by AK Floors Salesperson):** SALESPERSON #: \_\_\_\_\_ CUSTOMER CRM ID: \_\_\_\_\_

CUSTOMER TYPE: Purchasing Company Design & Purchasing FFE MGMT Company Franchise Owner Direct  
 Flooring Retailer Distributor Other (Specify):

## UNIFORM SALES & USE TAX EXEMPTION/RESALE CERTIFICATE — MULTIJURISDICTION

The below-listed states have indicated that this certificate is acceptable as a resale/exemption certificate for sales and use tax, subject to the notes on pages 2–4. The issuer and the recipient have the responsibility to determine the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: \_\_\_\_\_

Address: \_\_\_\_\_

I certify that:

Name of Firm (Buyer): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

is engaged as a registered

Wholesaler

Retailer

Manufacturer

Seller (California)

Lessor (see notes on pages 2–4)

Other (Specify) \_\_\_\_\_

and is registered with the below-listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, or ingredients or components of a new product or service to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) selling (California) the following:

Description of Business: \_\_\_\_\_

General description of tangible property or taxable services to be purchased from the Seller: \_\_\_\_\_

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL <sup>1</sup>		MO <sup>16</sup>	
AR		NE <sup>16</sup>	
AZ <sup>2</sup>		NV	
CA <sup>3</sup>		NJ	
CO <sup>4</sup>		NM <sup>4,17</sup>	
CT <sup>5</sup>		NC <sup>18</sup>	
FL <sup>6</sup>		ND	
GA <sup>7</sup>		OH <sup>19</sup>	
HI <sup>4,8</sup>		OK <sup>20</sup>	
ID		PA <sup>21</sup>	
IL <sup>4,9</sup>		RI <sup>22</sup>	
IA		SC	
KS		SD <sup>23</sup>	
KY <sup>10</sup>		TN	
ME <sup>11</sup>		TX <sup>24</sup>	
MD <sup>12</sup>		UT	
MI <sup>13</sup>		VT	
MN <sup>14</sup>		WA <sup>25</sup>	
		WI <sup>26</sup>	

I further certify that if any property or service so purchased tax free is used or consumed as to make 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 the Seller for added tax billing. This certificate shall be a part of each order that we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by thee city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: \_\_\_\_\_

(Owner, Partner, or Corporate Officer, or other authorized signer)

Title: \_\_\_\_\_

Date: \_\_\_\_\_