

NEW ACCOUNT APPLICATION

Please fill out all applicable info

Customer information

| Company Name: | | | | |
|-----------------------------------------------|---------------------|----------------------------------|--------------------------------------|--|
| Business Address | : | | | |
| Billing Address: | | | | |
| Website: | | | | |
| Telephone No. | | Fax: | | |
| Seller's Permit No | 0 | Contractor's License | Contractor's License No | |
| Driver's License | No | | | |
| Business Type: | ☐ Distributor | ☐ Showroom Dealer | ☐ Builder | |
| | ☐ Contractor | ☐ Interior Designer | ☐ Other: | |
| No. of Employees: No. of Years in Business: | | | S: | |
| Contact Person: | | Position: | | |
| Cell Phone: | | Email: | | |
| Sales Volume | | | | |
| No. of Kitchen C | abinet Sets/Month:_ | | | |
| Intended Purchas | ing Volume of 405 | Cabinets/Month: \$ | | |
| How did you l | hear about us? | | | |
| ☐ Business Affiliates ☐ Yelp / Google Reviews | | ☐ Friends/Family ☐ Online Search | ☐ Social Media ☐ Other: | |
| I hereby certify the disqualify me for | | nents are true and accurate. I u | understand that a false statement ma | |
| Authorized Signature: | | | Date: | |
| Print Name: | | | | |
| | | ****** | | |
| | & Stone Use Only: | | | |
| Sales Rep: | | | | |
| <i>Note:</i> | | | | |

Attach copies of Driver's License, Contractor's License, and Seller's Permit to application