



Contact Information:

Company Name: \_\_\_\_\_ DBA: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

AP Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

About your business:

Type of work:  Residential  Multi-Family  Commercial

Sales Tax:  Taxable  Non-Taxable  Tax Exempt

PLEASE PROVIDE NON TAX RESALE CERTIFICATE OR TAX EXEMPTION FORM

Texas Sales and Use Tax Permit Number \_\_\_\_\_

Annual purchases:  Less than 10K  10K-25K  26K or more

Payment Preferred:  Credit Card  Credit Terms  Check  Cash

(For Checks) TXDL: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please email me my receipts.  Yes, please  No thanks

SAVE A TREE? EMAIL ME MY STATEMENTS OR PAPER COPY? \_\_\_\_\_

Please email me your newsletter.  Yes, please  No thanks

Nursery/Floral Certificate Number \_\_\_\_\_

For office use only:

Customer ID Number \_\_\_\_\_

RP  WSL  WS2  WS3