

Account Application

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|---|--|-----------------------------------|---|--------------------------------------|-------------------------------------|--|--|------------------------------------|--------------------------------------|
| <p>Company Name _____ <i>(Legal Business Name)</i></p> <p>Owner's Name _____</p> <p>Company Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Office # _____ Cell Phone# _____</p> <p>Fax # _____ Email _____</p> <p>Website _____</p> | <p>Billing Address <input type="checkbox"/> _____ <i>(Check if same as above)</i></p> <p>City _____ State _____ Zip _____</p> <hr/> <p>Business Start-Up Year _____</p> <p>Type of Business:</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship</p> <p><input type="checkbox"/> Other _____</p> | | | | | | | | |
| <p>Business License / Contractor License _____ Exp. _____ <small>*A copy of Contractor license & Driver license is required</small></p> <p style="text-align: center;">OR</p> <p>Seller's Permit _____ <small>* California Customer - Fill out a "Resale Certificate," and submit a copy of the resale permit. * Out-of-State: Submit a copy of business license, resale permit and / or contractor permit.</small></p> <p>EIN # _____</p> | <p>Please check those applied</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Retailer</td> <td><input type="checkbox"/> Retailer <i>(Without Showroom)</i></td> </tr> <tr> <td><input type="checkbox"/> Distributor</td> <td><input type="checkbox"/> Contractor</td> </tr> <tr> <td><input type="checkbox"/> Interior Designer</td> <td><input type="checkbox"/> Builder / Developer</td> </tr> <tr> <td><input type="checkbox"/> Architect</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> <hr/> <p>How did you hear about us? (Check those applied)</p> <p><input type="checkbox"/> Referred by a Friend <input type="checkbox"/> Yellow Pages <input type="checkbox"/> TV</p> <p><input type="checkbox"/> Internet <input type="checkbox"/> Blue Book <input type="checkbox"/> Other _____</p> | <input type="checkbox"/> Retailer | <input type="checkbox"/> Retailer <i>(Without Showroom)</i> | <input type="checkbox"/> Distributor | <input type="checkbox"/> Contractor | <input type="checkbox"/> Interior Designer | <input type="checkbox"/> Builder / Developer | <input type="checkbox"/> Architect | <input type="checkbox"/> Other _____ |
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| <p>TRADE REFERENCE 1</p> <p>COMPANY _____ TEL _____ FAX _____</p> <p>ADDRESS _____</p> | | | | | | | | | |
| <p>TRADE REFERENCE 2</p> <p>COMPANY _____ TEL _____ FAX _____</p> <p>ADDRESS _____</p> | | | | | | | | | |
| <p>WHAT PRODUCT(S) ARE YOU INTERESTED IN BESIDES CABINETS, GRANITE, SINK, AND FAUCET? (OPTIONAL) _____</p> | | | | | | | | | |
| <p>AUTHORIZED PURCHASING AGENT(S) 1. _____</p> <p style="text-align: center;">2. _____</p> <p style="text-align: center;">3. _____</p> | | | | | | | | | |

PLEASE FAX BACK TO (224) 875-3350

PLEASE SUBMIT A COPY OF YOUR SELLER'S PERMIT OR CONTRACT LICENSE

J&K Cabinetry
1655 Busse Road
Elk Grove Village, IL 60007
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