

CUSTOMER PROFILE FORM

Please select customer type

New Customer

Existing Customer Update

Business Information

Business Name		
Doing Business As		
Business Address		
Business Phone	Business Fax	
Website		
Federal Tax ID #		

Shipping Address (<i>only if different than billing address</i>)		
Receiving Hours		

Is the company sales tax exempt?	Yes*	No
	<input type="checkbox"/>	<input type="checkbox"/>
* If you answer YES please include a copy of all applicable Sales Tax Resale Certificates		
Does your company belong to any buying group? *If you answer YES please let us know which one	<input type="checkbox"/>	<input type="checkbox"/>
Which states do you hold a tax exempt certificate? (check all that apply)		
Florida <input type="checkbox"/>	Tennessee <input type="checkbox"/>	Other () <input type="checkbox"/>
Georgia <input type="checkbox"/>	Alabama <input type="checkbox"/>	Other () <input type="checkbox"/>
North Carolina <input type="checkbox"/>	South Carolina <input type="checkbox"/>	

Contact Information

Accounts Payable	Name		
	E-mail		
	Phone	Business Fax	

Purchasing	Name		
	E-mail		
	Phone	Business Fax	

Preferred method of receiving invoices (check all that apply)	Email <input type="checkbox"/>	Postal Service <input type="checkbox"/>
---	--------------------------------	---

Customer Authorized Representative's Acknowledgement & Signature

By signing below, you acknowledge that the information provided on this form is correct.			
Signature Required*		Date	
Print Name		Title	
Phone		Fax	
E-Mail			

Have questions? Please contact your customer service representative at (888) 668-0121.
Email completed form to accounting@cdflooring.com or fax to (386) 668-0122.

CFD Internal Use Only

Entered By		Date Entered		Acct No.	
------------	--	--------------	--	----------	--