

Company Name:			
Business Type:	e: Open Date:		
Address:			
City:	State:	Zip:	
Fax:	Email:		
Company Website:			
Do you have a showroom?	Number of	showroom locations?	
Yes, please sign me up to receive	exclusive access to new pro	oduct promotions, special sales and	event invites!
Email:			
Accounting Contact:	Phone:	Email:	
Primary Contact:	Phone:	Email:	
Alternate Contact:	Phone:	Email:	
EIN/Contractor License Number:			
Do you require a sales rep?			

Will you be reselling purchased material? If so, please complete the resale form included.

All orders must include sales tax, until the form is received completed.

If you would like to keep a credit card on file, please complete the Credit Card Authorization form included.

## Fax or email back to:

214-741-2201 or <u>Dallas.operations@qdisurfaces.com</u>

All sales orders emailed to: <u>Dallas.operations@gdisurfaces.com</u>

www.QDIsurfaces.com 2605 Freewood Drive, Dallas, TX 75220 214-741-2200



## **Texas Sales and Use Tax Resale Certificate**

Name of purchaser, firm or agency as shown on permit		Phone (Area code and I	number)
Address (Street & number, P.O. Box or Route number)	-		
City, State, ZIP code			
Texas Sales and Use Tax Permit Number (must contain 11 digits)			
$Out-of\text{-}state\ retailer's\ registration\ number\ or\ Federal\ Taxpayers\ Registry\ (RFC)\ number\ or\ Registry\ (R$	mber for retailers based in Mexico		
(Retailers based in	n Mexico must also provide a cop	y of their Mexico reg	istration form to the seller.)
I, the purchaser named above, claim the right to make items described below or on the attached order or invol		r resale of the tax	cable
Seller:			
Street address:			
City, State, ZIP code:			
Description of items to be purchased on the attached order	or invoice:		
Description of the type of business activity generally engage	ged in or type of items normall	y sold by the purch	naser:
The taxable items described above, or on the attached geographical limits of the United States of America, its ter Mexican States, in their present form or attached to other tax	ritories and possessions or w		-
I understand that if I make any use of the items other than rete I must pay sales tax on the items at the time of use base period of time used.		-	
I understand that it is a criminal offense to give a resale cer are purchased for use rather than for the purpose of resale, may range from a Class C misdemeanor to a felony of the	lease or rental, and depending		-
sign Purchaser here	Title		Date



## **CREDIT CARD AUTHORIZATION FORM**

Company Name:	
I,	, hereby authorize QUARRIES
DIRECT INTERNATIONAL, LLC. (QDI Surfaces), to charge my cre-	dit card account in the amount not to exceed:
\$	
( ) VISA ( ) Mastercard ( ) AMEX ( ) Discover	
Credit Card Number:	
Expiration Date:/ VID Code: (last 3 digits on the back)	)
Credit Card Billing Address:	
Street:	
City:	State:
Zip Code: Country: (if not	
Telephone: ( )	
As the credit card holder, I hereby authorize receipt of goods & service	es at the QDI Surfaces Warehouse.
	·
	/ /
Cardholder's Signature Date	
( ) Keep credit card on file for future purchases.	
,	
Your completion of this authorization form helps us to protect you, our valued custom Quarries Direct International, LLC., will keep all information entered on this form strice.	

214.741.2200

479.365.6555

832.986.6515

817.834.8491

281.651.4285

602.269.7900

714.695.0084

713.957.2600

520.416.8100