

Company Name:

Business Type:

Address:

City:

State:

Email:

Company Website:

Do you have a showroom?

Number of showroom locations?

Yes, please sign me up to receive exclusive access to new product promotions, special sales and event invites!

Email:

Accounting Contact:

Phone:

Email:

Alternate Contact:

Phone:

Email:

Elin/Contractor License Number:

Elin/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:

817-834-3178 or FTWOrders@qdisurfaces.com

All sales orders emailed to: FTWOrders@gdisurfaces.com

www.QDIsurfaces.com 6318 Airport Fwy, Haltom City, TX 76117 817-834-8491



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 Mexico must also provide a copy of their Mexico registration 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	



Texas Sales and Use Tax Exemption Certification

This certificate does not require a number to be valid.

Name of purchaser, firm or agency			
Address (Street & number, P.O. Box or Route number)		Phone (Area code and n	umber)
City, State, ZIP code			
only, state, 211 code			
I, the purchaser named above, claim an exemption from items described below or on the attached order or involved.		se taxes (for the p	urchase of taxable
Seller:			
Street address:	City, State, ZIP (code:	
Description of items to be purchased or on the attached or	der or invoice:		
Purchaser claims this exemption for the following reason:			
Lundaratand that Lwill ha liable for neumant of all state and	local calca or uso tayos which	may basama dua f	or failure to comply with
I understand that I will be liable for payment of all state and the provisions of the Tax Code and/or all applicable law.	iocai sales of use taxes willch	may become due i	or randre to comply with
Live devictor of the etities a spinoine of effective to this experience of	wificate to the ocal and and and and	:to me a th a t 11	ha tima a afmi mala
I understand that it is a criminal offense to give an exemption ce will be used in a manner other than that expressed in this certific			
from a Class C misdemeanor to a felony of the second deg		or tan oration, tr	e eonsomay rango
Purchaser	Title		Date
sign here			
HOIO '			

NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

This certificate should be furnished to the supplier.

Do <u>not</u> send the completed certificate to the Comptroller of Public Accounts.



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