

Prospective Client Application * Complete & Sign



Fax: 312-283-0574

www.TextileRepublic.com

info@TextileRepublic.com

Date _____

Sales Rep _____

Account No. _____

Company Name _____

DBA _____

Billing Address _____

City, State, Zip _____

(Country)

Phone _____ Fax _____ Email _____

Web Address/URL _____

Owner/Partner/Officer _____ Buyer/Purchasing Mgr _____

Manager _____ Accts Payable Contact _____

Ship To (Company Name) _____

Shipping Address _____

Circle One: **Corporation / LLC / Sole Proprietor / Partnership** Mo/Year Established _____

State Sales Tax/Resale No. _____ County & State _____

Credit Card: **Mastercard or Visa** CC# _____

Exp. _____

3 digit verification code _____

Business Bank _____ Account # _____

(Name, City & State)

Describe Your Business (Circle One) **Manufacturer / Retail / Distributor / Other**

Describe Your Business _____

The following is made in lieu of all warranties, express or implied: Textile Republic, Inc.'s only obligation shall be to replace such quantity of the product proved to be defective. The seller shall not be liable for any injury, loss, injury or damage, direct or consequential, arising out of the use or inability to use product. User assumes responsibility, all risk and liability for use of the product.
