

East:

30727 BEVERLY, ROMULUS, MI 48174 TOLL FREE: (800) 622-9606 PHONE: (734) 641-6700 • Fax: (734) 641-6767 PHONE: (702) 228-3670 • Fax: (702) 228-3671

WEST:

2731 CRIMSON CANYON DR, LAS VEGAS, NV 89128 TOLL FREE: (800) 344-3371

RESELLER & CREDIT APPLICATION

I/WE herein make application to QVS for credit and/or to update and reconfirm our existing account and balance with QVS Applicants give their permission to QVS to verify the information stated herein. If credit is granted, I/WE promise to pay all bills rendered within the terms set forth by the QVS Credit Department. Please complete this form and fax or mail to QVS.

COMPANY NAME:	
Business Name (dba):	State Resale #:
CONTACT NAME:	Email Address:
PHONE #:	Fax #:
Address:	Ste/Apt/Bldg#:
City/State/Zip:	
Type of Business:	How Long: (YRS.)
FED ID #: D&B#: PA	RTNERSHIP 🔲 PROPRIETORSHIP 🔲 INC. 🔲 CORP. WHAT STATE:
If Less Than One (1) Year, Previous Address:	
COMPANY BANK:	Асст#:
Branch:	Contact:
Address: City/State:	Phone #: ()
Trade References:	
Name:	Солтаст:
PHONE #:	
Address:	
City/State/Zip:	
Name:	Contact:
PHONE #:	
Address:	STE/APT/BLDG #:
City/State/Zip:	
Name:	Contact:
Phone #:	
Address:	
City/State/Zip:	
COMPANY OWNED REAL PROPERTY: NO YES	
COMPLETE ADDRESS (IF DIFFERENT FROM ABOVE):	
Authorized People to Purchase:	
Purchase Order(s) Required: No Yes	Requested Credit Line: Est. Monthly Purchases:
QVS Representative:	\Box

Name:					
			SS#:		
Address:					
Тпс:			Own	RENT	
Name:			SS#:		
Address					
Гітье:			Own	RENT	
Default A greement - Corp	PORATION:				
In the event payment is not made amount of twenty-five percent of will be charged at the highest ra attorney fees in said suit or act quarters in Wayne County, MI. option of QVS is the venue for the	of the principal amount e ate authorized by law. I tion. It is understood th It is understood that in	except limited by loca f suit or action by an at all billing of accou the event of a suit or	law. I/WE i attorney is i nts receivab action, it is	inderstand nstituted, I lles & cred understoo	I interest on any unpaid bala /WE promise to pay reasona lit are processed through he d that Wayne County, MI, at
Signed:			DATE:		
Гпс:					
_			DATE		
Guarantor:					
SHIPPING (ADDRESS: Please specify if shipping address: Attention To: Address: City/State/Zip:	ess is different than the	billing address:	DATE:	DG#:	
SHIPPING GDDRESS: Please specify if shipping address: Attention To: Address: City/State/Zip:	ess is different than the	billing address:	DATE:	DG#:	
GUARANTOR:	ess is different than the	billing address:	DATE:	DG#:	
	ess is different than the	billing address:	STE/APT/BL	DG #:	

080902 CREDIT APPLICATION FORM

Note: As a QVS reseller, you will receive product news and promotions either by mail, fax or email.



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UNIFORM SALES & USE TAX CERTIFICATE FORM MUST BE COMPLETED. IF TAXABLE-WRITE TAXABLE IN SPACE FOR TAX NUMBER

SALES AND USE TAX CERTIFICATE **MULTI-JURISDICTION**

Issued to (Seller): C	2VS						
CERTIFY THAT							
				☐ WHOLESALER			
FIRM NAME:				Resaler			
Address:				Manufacturer			
, ABBINESS.				LESSOR			
Сіту		STATE ZIP		OTHER (SPECIFY)			
PHONE		Fax					
STATE	SALES TAX NO.	STATE	SALES TAX NO.	STATE	SALES TAX NO.		
Tax, we will pay th billing. This certific	if any property so purcha ne tax due direct to the p ate shall be part of each d by us in writing or revok	roper taxing author order which we r	ority when state law so may hereafter give to y	provides or inform t	the seller for added tax		
General description	n of the products to be pu	rchased from sel	ler:				
Under penalties of	perjury, I swear or affirm	that the information	on on this form is true a	nd correct as to ever	y material matter:		
Authorized Signatu	ure (Owner/Partner/Corpo	orate Officer)	Т	itle	Date		