

TRADE PARTNER APPLICATION

GENERAL INFORMATION								
Company Name:		DBA (if applic	cable):	Tax ID #:				
Billing Address:		City:	State:	Zip:				
Shipping Address:		City:	State:	Zip:				
Accounts Payable Contact:		Phone:	Fax:	Email:				
BUSINESS OWNER(S), PA	ARTNER(S), OR	OFFICER(S)						
Name:	Title:		Email:	Phone:				
Name:	Title:		Email:	Phone:				
TRADE REFERENCES								
Name:	Account#:		Email:	Phone:				
Name:	Account#:		Email:	Phone:				
Name:	Account#:		Email:	Phone				

TRADE	RELATIONSF	IIP PREFERENCES							
Prefer Cli	ck Cabinets to	work with a representa	tive from your co	mpany or directly wit	h your cli	ent?			
	\square Work with our company only			client directly	□Job	\square Job depending			
Can pricin	ig be discusse	d with your client?							
	□Yes	□No	☐Generically (High, Med, Low)			\square Job depending			
Trade Dis	count to be fo	orwarded to client?							
	□Yes	□No	☐Generically (H	Depending					
Your Clier	nt to remit pay	yment to Click Cabinets	directly or to you	r company which will	remit pay	yment to Click Cabinets?			
	☐Client to	pay Click	\square Client to pay us/We will pay Click		□Job	\square Job depending			
Sales and	use tax exem	pt? (Not available if clie	nt is to pay Click d	irectly)					
	□Yes, plea	se send an exemption fo	orm □No, w	e will pay sales tax to	Click	\square N/A - Out of state			
TERMS A	AND CONDI	TIONS							
Parties agree that all purchases made are subject to the following terms and conditions:									
- A - A w - It la o - P p	Il cabinets ar ny shipping o riting within rarranties for is understoc w will be MI ther states la urchaser agr ay any unpai he undersigr	law. Purchaser agrees w.	fore returns or e ems from shipm order to receive r legal action, Del to waive their ri certified mail of e. nation provided	xchanges are not acted the must be report eplacement. See in the Co, MI will be the ght to litigate outsing any changes in ow above is true and co	ccepted. ed to Clid idividual e venue f ide of De nership c	ck representative in manufacturer for litigation. Choice of elta Co, MI or under any of the Purchaser and to the best of their			
(Signature)			(Printed Name)			(Date)			