

FORTUNE PRODUCTS, INC.

# Account Profile

Questions about how to complete this form?

Call 830-693-6111  
(8 a.m. To 4 p.m. CST)

Return completed form to

*Fortune Products, Inc.*  
2010A Windy Terrace  
Cedar Park, TX 78613  
Or FAX to 830-693-6394

## Organization

Organization Name			DBA or Trade Name		
BILLING ADDRESS			SHIPPING ADDRESS		
Address Line 2			Address Line 2		
City	State	Zip	City	State	Zip
Phone	Country		Phone	Country	
Fax	Is This A Residence? ____YES ____NO		Fax	Is This A Residence? ____YES ____NO	

## Type of Business

Business Entity  
 SOLE PROPRIETORSHIP     PARTNERSHIP     CORPORATION     OTHER (LLC, Etc.)

SSN# (Sole Proprietors):	E.I.N. #:	STATE TAX ID #:	TEXAS BUSINESSES MUST FURNISH SIGNED RESALE CERTIFICATE.
Years in Business (This Name)	Number of Employees	Number of Salespeople ____INSIDE ____OUTSIDE	Warehouse Area (Sq.Ft.)

Sales Entity  
 WHOLESALER     RETAILER     JOBBER     OTHER (Please Explain) \_\_\_\_\_

Describe your general lines of merchandise: \_\_\_\_\_

What geographical area do you service? \_\_\_\_\_

## Owners & Principals

Name	Title	Name	Title		
Address		Address			
City	State	Zip	City	State	Zip

## References

Bank Name	Address	City	State	Zip
Bank Officer	Years Associated	Phone	Fax	
Trade Name #1	Address	City	State	Zip
Contact/Title	Years Associated	Phone	Fax	

Type of products purchased: \_\_\_\_\_

Trade Name #2	Address	City	State	Zip
Contact/Title	Years Associated	Phone	Fax	

Type of products purchased: \_\_\_\_\_

Trade Name #3	Address	City	State	Zip
Contact/Title	Years Associated	Phone	Fax	

Type of products purchased: \_\_\_\_\_

Please be as complete as possible. This application will be used to establish your qualifications to buy direct from us and to qualify your company to purchase on an open account basis. We will process this application as soon as possible. No sales will be made to your company until we are in possession of a completed copy of this form and any other forms which may accompany it. Company named above claims the right to make non-taxable purchases for the purpose of re-sale under the State tax or license # shown above.

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_