



2515 Semco Drive Belton, MO 64012 • Phone: (816) 318-1203 • Fax: (816) 318-1302

Website: www.SemcoOutdoor.com • Email: infoKC@semcostone.com

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WHOLESALE ACCOUNT INFORMATION SHEET

Any customer who wishes to be considered for wholesale status must satisfy the following: provide a current vendor's license number, provide a company letterhead or business card, make annual purchases in excess of \$1000.00, and complete a Semco Stone Customer Application Form. Upon receipt of the above listed items, a wholesale account will be established in our system. A separate Credit Application must be completed and approved for credit privileges. We accept the following method of payment: Master Card, Visa, Discover, American Express, cash, check accepted with a valid driver's license and Certegy approval.

NAME OF BUSINESS/ORGANIZATION: _____

BILLING ADDRESS	SHIPPING ADDRESS	CHECK HERE IF SAME AS BILLING
Address: _____	Address: _____	
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____	
Phone #: _____ Fax #: _____	Attention: _____	
Email: _____	Phone #: _____ Fax #: _____	
Company Website: _____	Email: _____	
Years at address: _____ Date business commenced: ____/____/____		

OWNERSHIP:

INDICATE ONE: Sole Owner Partnership Corporation Limited Liability Corporation Other _____

Has your company operated under any other names? Yes No Federal Tax I.D. # _____

If yes was checked, include those said "principals" here: _____

COMPLETE IF SOLE OWNER OR PARTNERSHIP

Owner/Partner: _____	Co-Owner/Partner: _____
Home Address: _____	Home Address: _____
Cell #: _____ Email: _____	Cell #: _____ Email: _____
Date of Birth: ____/____/____ Drivers License #: _____	Date of Birth: ____/____/____ Drivers License #: _____

PURCHASE ORDERS:

DO YOU REQUIRE PURCHASE ORDER NUMBERS? Yes No

Names of employees authorized to purchase: _____

TAX EXEMPT

Is your business: Taxable Non-Taxable Tax I.D. # _____

*NOTE: If non-taxable, please submit a copy of your tax exemption certificate with this form. Sales tax will be charged until tax exempt forms are in our possession.

OFFICE USE ONLY

Date submitted: ____/____/____ Sent to Credit Mgr: ____/____/____

SALES REP: _____ Set up in Salesforce Yes No



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BLANKET SALES TAX RESALE (EXEMPTION) CERTIFICATE

Purchaser hereby certifies that:

(1) Purchaser holds valid registration permit number _____ issued, under the Sales Tax Law of the State of _____

(2) The tangible property purchased on each order we shall give, unless such order shall otherwise specify and until this notice is revoked by us in writing, is:

(Check one)

For Resale reported on Sales Tax Filings as sales of tangible personal property

Exempt because we are a Tax Exempt Institution. (Please attach copy of Tax Exempt Letter.

Exempt for other reasons. Please explain: _____

Fully taxable on all items purchased.

(3) The undersigned purchaser further certifies that he will assume liability for payment of tax if he uses or consumes the property herein purchased in such manner as to render the sales subject to tax.

Signature: _____ Date: ____/____/____

Printed Name: _____

IF APPLICABLE:

A COPY OF THE TAX EXEMPTION CERTIFICATE MUST BE FAXED OR MAILED ALONG WITH THIS CREDIT APPLICATION

