TETER'S FAUCET PARTS CORP.



F 214-824-2520

POB 141075

CREDIT CARD ACCOUNT

- 1. This form is in a fillable PDF format.
- 2. Please complete all relevant sections.
- 3. Please e-mail your complete form to: kimbrooks@tetersfaucetparts.com

Busine	ss Name and Billing Ad	dress:			
Name	e				_
Addre	ess				_
City		State	Zip	Phone #	<u> </u>
Conta	act			<u>—</u>	
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Sales T	ax Status (Check appro	priate box):			
Taxable Nontaxable			If nontaxable inclu	de Tax Exer	mpt Certificate
					
Type of	Business (Check appr	opriate box):			
	Plumbing Contractor	Hotel/Motel	Commercial	Building	Apartments
	School	Government	Hospital/Nur	sing Home	Plumbing Supplier
	Other				
		 Date	Date		
Signed					
oigrica			 Teter's Acc	ount Rep.	CREDIT CARD ACCT
Dulin t N			1.	∕ima Desales	044 000 7040
Print Name			Kim Brooks <u>214-823-7012</u>		