

FL
EUR

Trade Account Application

FIRST & LAST NAME

BUSINESS NAME

EIN/TAX ID NUMBER

BUSINESS ADDRESS

CITY

STATE

ZIP

MAILING ADDRESS

CITY

STATE

ZIP

PHONE

FAX

EMAIL

WEBSITE

PLEASE FILL OUT THE FORM ABOVE AND SUBMIT TO US ALONG WITH A COPY OF YOUR RESALE CERTIFICATE (THIS DOCUMENT IS REQUIRED FOR TAX-EXEMPT STATUS) AND SALES AND USE PERMIT (PLEASE PROVIDE THIS DOCUMENT FOR SUPPLEMENTAL VERIFICATION PURPOSES). SUBMIT ALL INFORMATION TO TRADE@FLEURHOME.COM. UPON APPROVAL, YOU WILL RECEIVE AN EMAIL FROM US WITH YOUR TRADE ACCOUNT INFORMATION.