

CUSTOMER PROFILE

From: _____

To: _____

Date: _____

Thank you for your interest in Lamin-Art. Please take a moment to complete this customer profile. Account information submitted on this form will remain confidential and be used for the sole purpose of communicating with you. Under no circumstances does Lamin-Art sell or disclose personal information to third parties. We appreciate your interest in Lamin-Art's premium decorative surfacing materials and we look forward to doing business with you.

1. Company Name: _____
Street: _____
City: _____ **State:** _____ **Zip Code:** _____
Main Phone: (____) _____ **Main Fax:** (____) _____ **Website:** _____

2. Billing Address (disregard if same as above)

Street: _____
City: _____ **State:** _____ **Zip Code:** _____

3. Shipping Address (disregard if same as above)

Street: _____
City: _____ **State:** _____ **Zip Code:** _____

4. Is your business exempt from sales tax? ☐ Yes ☐ No (if yes, please include copy of Tax Exempt certificate)

Please list your county regardless of your tax exempt status: _____

5. PURCHASING CONTACT

Name: _____
Title: _____
Direct Phone: (____) _____ **Fax:** (____) _____
E-Mail: _____

6. ACCOUNTING CONTACT

Name: _____
Title: _____
Direct Phone: (____) _____ **Fax:** (____) _____
E-Mail: _____

7. Number of Employees:

☐ less than 10 ☐ 10-25 ☐ 25-50 ☐ 50 or more

Primary Business:

☐ Commercial case goods ☐ Architectural Millwork ☐ Custom Cabinets ☐ Kitchen & Bath
☐ Exhibits of TV/movie sets ☐ Store Fixtures ☐ Furniture ☐ Panel Processing
☐ Distribution

8. Please specify your preferred method of payment:

☐ Credit Card (Visa and Mastercard only)
☐ COD (U.S. only)
☐ Net 30 (please complete and submit attached credit application)

9. Fax completed form(s) to our Accounting Department at 847.860.9199

Questions? Please contact Customer Service at **800.323.7624** Monday through Friday 7:30am-5pm Central Time, via e-mail: customerservice@laminart.com, or via fax: **847.860.0246**