

Account Application**Rubenstein & Ziff and The Quiltworks**1055 E. 79th St. Minneapolis, MN 55420-1460
(952) 854-1460 ♦ Fax (952) 854-7254

Office Use Only

Acct. # _____

Information Sent

Date _____ Area _____ Type _____

Salesperson _____ Terms _____

Credit Limit _____ Source _____

Approved By _____

Business Name _____ Accts. Payable Name _____
 Mailing Address _____ Shipping Address _____
 City/State/Zip _____ City/State/Zip _____
 Business Phone _____ Payable Phone # _____ Fax # _____
 E-Mail Address _____

OWNER/OFFICER INFORMATION Name/Address/Home Phone (must be completed)

Owner's Name _____ Owner's Name _____
 Home Address _____ Home Address _____
 City/State/Zip _____ City/State/Zip _____
 Home Phone _____ Home Phone _____
 Sole Owner Partnership Corporation Buyer's Name _____

Names of Authorized Acct. Users _____

COMPANY INFORMATION

Sales Tax ID No./EIN No. _____ Social Security # _____
 Description of Business _____ How Long In Business _____ Annual Sales _____
 Account Requested C.O.D. (Co. Check) Cash Net 30 Credit Monthly Line
 Credit Card Card # exp. / of Credit Desired _____
 Merchandise You Plan to Purchase Fabrics Supplies Crafts Industrial Other Have you had an acct. w/us before? _____

APPLICANT AGREEMENT

APPLICANT AGREES THAT THE EXTENSION OF CREDIT SHALL BE SUBJECT TO AND IN CONSIDERATION OF THE FOLLOWING TERMS AND CONDITIONS:

1. Payment will be made of all amounts due as indicated on each invoice.
2. Amounts not paid on time are subject to a 1.5% per month (or maximum allowable charge by law in the state in which the sale is made) late-payment charge to be assessed from the first day that the balance is past-due. However, no such charge shall be imposed when doing so would violate law.
3. Should it be necessary to refer the account balance to a licensed collection agency or attorney for legal action, applicant agrees to pay a 20% collection fee, reasonable attorney fees and court costs.
4. Application authorizes and grants the seller the right to investigate credit references and banking information listed.
5. **I (WE) HAVE READ THE ABOUT AGREEMENT**

Signed _____ Title _____ Date _____
 I certify the information supplied is true and correct. I authorize Rubenstein & Ziff, Inc. to contact my references to establish credit terms.

Signed _____ Title _____ Date _____
 I certify the information supplied is true and correct. I authorize Rubenstein & Ziff, Inc. to contact my references to establish credit terms.

GUARANTY

In addition to agreeing to pay any and all collection expenses, legal fees and interest charges stated above, I/We, hereby, personally and severally, give this continuing Guaranty to _____ and will pay all bills that are not paid when due. Notwithstanding the fact this guaranty has been executed in corporate capacity each signer is personally responsible for payment.

Signed _____

Print _____

Signed _____

Print _____

More On Reverse 

BANK REFERENCE AUTHORIZATION (must be completed)

For the purpose of obtaining merchandise on credit, I authorize:

Bank Name _____ Banker _____ Bank Address _____
 Phone # _____ City _____ State _____ Zip _____
 to release information on my financial condition. PERSON ON BANK SIGNATURE CARD SIGNS BELOW.

Signature _____ Account # _____
 Position or Title/Business Name _____ Date _____

TRADE REFERENCES List 3 or more commercial firms from which you buy on credit (required for Net 30 Credit)

Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Phone # _____ Fax # _____	Phone # _____ Fax # _____
Account Number _____	Account Number _____

Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Phone # _____ Fax # _____	Phone # _____ Fax # _____
Account Number _____	Account Number _____

To enable us to give you the highest possible monthly line of credit and to expedite processing, please supply us with a personal net worth statement(s) if your business is a sole operating proprietorship or partnership. If your business is incorporated, we will need the most recent corporate balance sheet. The undersigned agrees that upon approval of this application for credit, any charges to his/her account are due and payable under the terms of Rubenstein & Ziff, 1055 E. 79th Street, Minneapolis, MN 55420. The undersigned also agrees to pay all actual costs of collection, including court costs and reasonable attorney fees.

Signed _____ Title _____ Date _____
 I certify the information supplied is true and correct. I authorize Rubenstein & Ziff, Inc. to contact my references to establish credit terms.

Minnesota Department of Revenue
 Sales and Use Tax Division
Certificate of Exemption ST-3

Purchaser: Complete this certificate and give it to the seller. Be sure to fill in the exemption code in the space provided.
Seller: Keep this certificate as part of your records. Incomplete certificates cannot be accepted in good faith.

Print or type	Name of Authorized purchaser _____		MN tax ID number (if no number, state reason) _____		
	Name of purchaser's business _____				
	Business address _____		City _____	State _____	Zip code _____
	Name of seller from whom you are purchasing, leasing or renting merchandise Rubenstein & Ziff, Inc. and The Quiltworks Division Address _____ City _____ State _____ Zip code _____ 1055 East 79th Street Minneapolis MN 55420-1460				
		Exemption code Resale			
		Check one:			
		<input type="checkbox"/> Single purchase certificate			
		<input checked="" type="checkbox"/> Blanket certificate*			
				*If blanket certificate is checked, this certificate continues in force until cancelled by the purchaser.	

Describe your business and merchandise purchased	Describe the nature of your business or organization. Include a description of the merchandise normally sold in your business, if applicable. _____ _____
	Describe the merchandise for which you are claiming exemption. Crafts, domestics, fabrics and notions _____ _____

Sign here	<i>I declare that the information on this certificate is correct and complete to the best of my knowledge and belief. (PENALTY—If you try to evade paying sales tax by using an exemption certificate for merchandise that will be used for purposes other than those being claimed, you may be fined \$100 under Minnesota law for each transaction for which the certificate is used.)</i>		
	Signature of authorized purchaser _____	Title _____	Date _____

If you have questions, call the MN Department of Revenue at (612) 296-6181 or toll-free 1-800-657-3777.
 TDD users may call the department through the MN Relay Service at (912) 297-5353 or 1-800-627-3529; ask for (612) 296-6181