



# ACCOUNT APPLICATION

P.O. Box 1563, Longview, Texas 75601  
800-448-6171 altcolorlab.com

*This application must be completed in full for all types of accounts: Prepay, C.O.D. and Credit Cards.  
Credit Card accounts must have Credit Card Billing Authorization Form completed.*

**BUSINESS/CORPORATE/DBA NAME** \_\_\_\_\_

**OWNER'S NAME(S)** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY, STATE, ZIP** \_\_\_\_\_

**BUSINESS PHONE** \_\_\_\_\_ **CELL PHONE** \_\_\_\_\_

**FAX** \_\_\_\_\_ **E-MAIL ADDRESS** \_\_\_\_\_

**TYPE OF ACCOUNT REQUESTED:**  Prepaid  MC/Visa/Discover/AMEX  C.O.D. (Call for Open Account)

## CREDIT CARD AUTHORIZATION

Please include the Credit Card Authorization form for credit card accounts.

## TEXAS RESALE CERTIFICATE

**Texas Residents Only:** Include this form for tax exemption.

## SHIPPING PREFERENCE

I prefer to have my orders shipped via:

Federal Express (FedEx)  United States Postal Service  Counter Pickup

We/I agree to notify immediately in writing of any changes of ownership. If granted credit, I agree to pay all invoices according to your terms. Any communications concerning disputed debts, including an instrument tendered as full satisfaction of a debt, are to be sent to Ark-La-Tex Color Lab, Attn.: Accounts Receivable Dept., P.O. Box 1563, Longview, TX 75606. Submitting any media to Ark-La-Tex Color Lab for processing, printing or other handling constitutes an AGREEMENT by you that any damage or loss by our company, subsidiary or agents will only entitle you to replacement with a like amount of media is without other warranty or liability and recovery for any incidental or consequential damages is excluded. Ark-La-Tex Color Lab shall not be liable for any losses, damages or expenses, whether direct or consequential, due to or caused by delays in delivering a processed or printed product of Ark-La-Tex Color Lab to the customer.

Date \_\_\_\_\_ Signature \_\_\_\_\_

*If partnership, both parties must sign* \_\_\_\_\_

I understand that entering my name above and checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.

# TEXAS RESALE CERTIFICATE

Name of Purchaser, firm or agency	Phone (Area code and number)												
Address (Street & number, P.O. Box or Route number)													
City, State, ZIP Code													
Texas Sales or Use Tax Permit Number (or out-of-state retailer's registration number or date applied for Texas Permit - must contain 11 digits if from a Texas permit)													
<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>													(Mexican retailer's must show their Federal Taxpayers Registry (RFC) number on the certificate and give a copy of their Mexican registration form to the seller.)

I, the purchaser named above, claim the right to make a non-taxable purchase for resale of the taxable items described below or on the attached order or invoice form:

Seller: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Description of items to be purchased or on the attached order or invoice:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

\_\_\_\_\_

\_\_\_\_\_

The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions, or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

*I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.* \_\_\_\_\_

<b>sign here</b> ➡	Purchaser	Title	Date
--------------------	-----------	-------	------

I understand that entering my name above and checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.

This certificate should be furnished to the supplier. Do **not** send the completed certificate to the Comptroller of Public Accounts.

# CREDIT CARD BILLING AUTHORIZATION FORM

YOUR COMPANY NAME: NAME ON CREDIT CARD:	
PERSON AUTHORIZING:	
CREDIT CARD TYPE:	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express
ISSUING BANK:	
CREDIT CARD NUMBER:	
CVC NUMBER:	Last 3 Digits from the back of card or 4 digits from face of card
EXPIRATION DATE:	
BILLING ADDRESS:	
CITY:	
STATE:	
ZIP CODE:	
PHONE NUMBER:	
FAX NUMBER:	
PLEASE SELECT ONE OF THESE PAYMENT OPTIONS:	<input type="checkbox"/> Please bill my credit card once for the following amount <hr/> <input type="checkbox"/> Please bill my credit card for each order placed <input type="checkbox"/> Please bill my credit card once a month* *(only available after 60 days)

Applicant agrees that all information provided is accurate and complete. Applicant also acknowledges that all orders may be immediately terminated at Ark-La-Tex Color Lab's discretion if any charges are declined or charge backs are claimed against any outstanding invoiced amount. Disputes to amounts should immediately be reported to Ark-La-Tex Color Lab.

The undersigned is the duly authorized representative of the company stated above:

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

I understand that entering my name above and checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.