



dealer application

Please print or type answers to the questions and place in enclosed reply envelope.

Resale Certificate No.		Office Use Only DC No.		CN No.	
Firm Name		Telephone Number ()		E-Mail Address	
Street Address		FAX Number ()		Mail Address (if different than street address)	
City		County		State	
				Zip Code	
Primary Type of Business					

PRINCIPAL OWNERS & OFFICERS

Name	SS#	Position or Title	Full Time	Part Time
			<input type="checkbox"/>	<input type="checkbox"/>

Home Address: Street-City-State-Zip

How Long in Business? _____ Amount of Credit Line Requested _____

Partnership Proprietorship Listed with Dun & Bradstreet

Corporation Branch State of Incorporation _____

IMPORTANT: SALES TAX EXEMPTION

By law, Ennis must charge sales tax if a valid resale certificate is not completed and returned to us. If you do not complete the attached Blanket Resale/Exemption Certificate, one will be mailed to you within two weeks of opening your account. To be considered valid the certificate must indicate your resale certificate number and must be signed.

Please furnish us the information listed below for one bank reference and two supplier references.

BANK NAME	Bank Name	Account No.	Phone ()
	Address		Fax
	City	State	Zip
CREDIT REFERENCES	Supplier Name	Account No.	Phone ()
	Address		Fax
	City	State	Zip
	Supplier Name <td>Account No. <td>Phone ()</td> </td>	Account No. <td>Phone ()</td>	Phone ()
	Address		Fax
	City	State	Zip

APPLICANT'S SIGNATURE attests financial responsibility, willingness, and ability to pay invoices in accordance with Ennis terms. Further, it is understood orders or shipments will be held if account falls beyond terms. Applicant also acknowledges responsibility for any costs and expenses incurred in the collection of account by third party. The above information is willingly supplied and applicant authorizes Ennis to make the necessary inquiries with bank/trade references, and to obtain credit reports individually (if applicable) and/or financial statements from Company in the extension or continuation of credit terms. Applicant's signature or first submitted order also attests acceptance of Ennis trade policies. To view a copy of these policies, visit www.ennis.com/policies or request by phone from the Ennis accounting department.

Signature _____ Date _____

Title _____

PLEASE RETURN THE ORIGINAL OF THIS FORM TO:

Ennis Customer Finance
2441 Presidential Pkwy.
Midlothian, TX 76065

PHONE: (800) 962.0944 FAX: (972) 775.9196

BLANKET RESALE/EXEMPTION CERTIFICATE

The undersigned vendee hereby certifies that it is a regularly licensed retailer under the Law(s) of the state(s) indicated on the reverse side of this form holding the sales tax license or permit number(s) there enumerated and that all the tangible personal property purchased from:

Ennis, Inc.	Ennis Business Forms, Inc. (EBF)	American Forms L.L.P.
Admore, Inc.	Texas EBF, L.P.	Adams McClure L.L.P.
Alstyle Apparel, L.L.C.	EBF of Kansas, Inc.	General Financial Supply
Atlas Tag and Label, Inc.	GenForms	Northstar Computer Forms, Inc.
Calibrated Forms Co.	Witt	Royal Business Forms, Inc.
Crabar/GBF	TBF/avant-garde	Block Graphics, Inc.
Specialized Printed Forms	B&D Litho	Skyline Business Forms
Trade Envelopes	Printgraphics	Printegra
PrintXcel		

Is exempt from sales and use tax for the following reason: (Check applicable reason below)

NAME _____

RETURN TO: **Ennis, Inc.**
Attn: Tax Department
2441 Presidential Pkwy.
Midlothian, Texas 76065

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CUSTOMER NUMBER

Product that you will purchase: _____

Primary type of business: _____

Check



_____ Resale, in the regular course of business, in the form of tangible personal property.

_____ Incorporating the same, as a material, ingredient or component part, into tangible personal property produced for sale.

_____ Other authorized exemption (described).

This certificate shall be considered a part of each order given by vendee from and after the effective date hereof, unless such order shall otherwise specify.

This certificate shall continue in full force and effect unless and until revoked in writing by the vendee.

The vendee understands and agrees that if it uses any property purchased tax-free under this certificate in any manner which would not exempt the sale from tax, it becomes the user or consumer of such property, and as such assumes liability for and undertakes to pay the tax and interest and penalty thereon, if any.

Dated as of the _____ day of _____, 20 _____.

**PLEASE INCLUDE YOUR SIGNATURE, TITLE
AND RESALE CERTIFICATE NUMBER.**

Name of Purchaser (print or type)

Address

Signature of Purchaser or Agent

City, State, Zip

Title of Authorized Agent

State Exempt In (See reverse side if more than one state.)

Resale Certificate Number

If you are exempt in more than one state, please fill in the appropriate blank on reverse side.

IMPORTANT

Please insert your Sales Tax License or Registration Number in the following tax jurisdictions in which you are registered:

Resale Certificate Number

ALABAMA _____

ALASKA _____

ARIZONA _____

ARKANSAS _____

CALIFORNIA _____

COLORADO _____

CONNECTICUT _____

DELAWARE _____

DISTRICT of COLUMBIA _____

FLORIDA _____

GEORGIA _____

HAWAII _____

IDAHO _____

ILLINOIS _____

INDIANA _____

IOWA _____

KANSAS _____

KENTUCKY _____

LOUISIANA _____

MAINE _____

MARYLAND _____

MASSACHUSETTS _____

MICHIGAN _____

MINNESOTA _____

MISSISSIPPI _____

MISSOURI _____

Resale Certificate Number

MONTANA _____

NEBRASKA _____

NEVADA _____

NEW HAMPSHIRE _____

NEW JERSEY _____

NEW MEXICO _____

NEW YORK _____

NORTH CAROLINA _____

NORTH DAKOTA _____

OHIO _____

OKLAHOMA _____

OREGON _____

PENNSYLVANIA _____

RHODE ISLAND _____

SOUTH CAROLINA _____

SOUTH DAKOTA _____

TENNESSEE _____

TEXAS _____

UTAH _____

VERMONT _____

VIRGINIA _____

WASHINGTON _____

WEST VIRGINIA _____

WISCONSIN _____

WYOMING _____