



# Customer Information Form

9500 SE 327th Ave. | P.O. Box 189 | Boring, OR 97009 | 503-663-4128 | fax 503-663-2121 | www.jfschmidt.com  
customerservice@jfschmidt.com

## Business Information

Business Name: \_\_\_\_\_ Company Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

A/P Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**Payment Type:**  Cash in Advance  Apply for Credit

Primary Buyer: \_\_\_\_\_ Email: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Primary Shipping Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Primary Shipping Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Alternate Shipping Address: \_\_\_\_\_

Type of Business:  Grower  Wholesale Nursery  Retail Nursery  Other \_\_\_\_\_

Marketing:  Add to Email list  Mailings (brochures, other info)  Catalog

Additional Information (More contacts, special notes, etc.)

## Resale Certificate: Sales Tax Exemption Certificate

Please attach a copy of your Exemption Certificate

State of: _____	Firm Name _____
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I hereby certify that I hold a valid **SELLERS PERMIT** (# \_\_\_\_\_) issued pursuant to the Sales and Use Tax laws; that I am in the business of selling **NURSERY STOCK, Plants & Trees**. Which I shall purchase from: **J. Frank Schmidt & Son Co.** to be resold by me. In the event that such tangible property is used for any purpose other than retention, display, demonstration while holding it for sale in the regular course of business, it is understood that I may be required by this state to report and pay tax, measured by the purchase price.

Dated: \_\_\_\_\_ Name: \_\_\_\_\_ Signature: \_\_\_\_\_

at \_\_\_\_\_ Title \_\_\_\_\_  
City, State

Phone: \_\_\_\_\_ Address \_\_\_\_\_