

**HEADQUARTERS & FARGO WAREHOUSE**

PO Box 699 - West Fargo, ND 58078-0699

1271 Fayland Dr N - Fargo, ND 58102

Phone: 701-282-8451 Fax: 701-282-9486

**SIOUX FALLS WAREHOUSE**

723 E Gateway Blvd - Tea, SD 57064

Phone: 605-368-5226

EMAIL COMPLETED APP TO: DSI@DSIAUTOMOTIVE.COM

## CREDIT CARD ACCOUNT APPLICATION

### #1 - Business Information \*ACCOUNTS WITH DSI ARE ONLY AVAILABLE TO VERIFIED BUSINESSES

Company Name (Legal &amp; DBA) \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shipping Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Main Phone \_\_\_\_\_ Parts Phone \_\_\_\_\_

Federal Taxpayer ID Number (W-9) \_\_\_\_\_ \*Is a LIFTGATE needed? ☐ Yes ☐ No

Describe This Business \_\_\_\_\_

Current Suppliers \_\_\_\_\_

**Authorized Buyers & Titles**

Do you want to receive an invoice email? (circle one)

Name/Title \_\_\_\_\_ Email \_\_\_\_\_ Invoices: Y / N

Name/Title \_\_\_\_\_ Email \_\_\_\_\_ Invoices: Y / N

Name/Title \_\_\_\_\_ Email \_\_\_\_\_ Invoices: Y / N

### #2 - Accounting Information

Type of Account Terms: Credit Card

Date Business Founded \_\_\_\_\_

Purchase Order Required? ☐ Yes ☐ No Any special instructions for PO: \_\_\_\_\_

Invoices Email (If different than above) \_\_\_\_\_

### #3 - Sales Tax Exemption Certification

State tax laws require us to maintain a **Certificate of Resale** or **Processing Certificate** on file for all customers claiming sales tax exemptions. However, some goods or services may still be taxable despite having a Resale Certificate **A copy of Tax Certificate must be included.**

Do you claim an exemption from State Sales Tax? ☐ Yes (complete below) ☐ No (charge tax on all orders)

We hold Sales and Use Tax Permit No. \_\_\_\_\_ from the State of \_\_\_\_\_. As a business engaged in the sale of products, we certify that the products and/or services purchased from DSI are intended for resale. We acknowledge our responsibility for any applicable taxes on products acquired from DSI that do not qualify for tax-exempt status, including those for our own use or consumption.

### #4 - Verification of Information

"I have completed the Account Application and State Sales Tax Certification and I verify that the information is true and accurate."

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

**INTERNAL  
USE ONLY**☐ Approved - Salesperson \_\_\_\_\_

Acct # \_\_\_\_\_

Reviewed By \_\_\_\_\_

☐ Denied \_\_\_\_\_

B C E S L W T

Date \_\_\_\_\_