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Credit Application and Sales / Use Tax Verification

APPLICANT'S NAME AND ADDRESS:

LEGAL NAME OF COMPANY	TRADE STYLE	FAX NUMBER
CONTACT NAME		
STREET ADDRESS	CITY, STATE	ZIP CODE
ADDRESS FOR INVOICES	CITY/STATE	ZIP CODE
TELEPHONE NUMBER	TYPE OF BUSINESS: I.E., CORP., SUB. "S" CORP., PARTNERSHIP, ETC.	
NATURE OF BUSINESS	STATE OF INCORPORATION/ REGISTRATION	

APPLICANT'S TRADE REFERENCES:

SUPPLIER: NAME, ADDRESS, CITY, STATE and ZIP CODE	CREDIT MANAGER	
	ACCOUNT NUMBER	TELEPHONE NUMBER
SUPPLIER: NAME, ADDRESS, CITY, STATE and ZIP CODE	CREDIT MANAGER	
	ACCOUNT NUMBER	TELEPHONE NUMBER
SUPPLIER: NAME, ADDRESS, CITY, STATE and ZIP CODE	CREDIT MANAGER	
	ACCOUNT NUMBER	TELEPHONE NUMBER
Bank Reference:		
BANK	ACCOUNT NUMBER	BANK OFFICER <input type="text"/>
ADDRESS	CITY / STATE	ZIP PHONE NUMBER
NAME AND POSITION		
SIGNATURE		DATE
Please fax signed, completed applications to: 847-701-0383.		

SALES / USE TAX VERIFICATION:

Purchaser:

The undersigned certifies that all the information listed below is correct:

Type of activity:	Please be specific.
Manufacturer	
Wholesaler	
Retailer	
Contractor	
Other (specify)	

Purchaser intends to buy chemicals from Shamrock Chicago Corp. in the regular course of its business.

Any of such property purchased from Shamrock Chicago will be:

- Resold as tangible personal property in the same form as received.
- Used as an ingredient or integral part of an end product for sale by manufacturing, processing, etc.
- Other (specify)

Sales and/or use tax on all tangible property purchases are to be handled as follows:

- All purchases are Taxable.
- Some purchases are taxable, others are exempt.
THE PURCHASE ORDERS WILL CLEARLY INDICATE CORRECT TAX STATUS.
- Blanket exemption for resale.
- Blanket exemption for other statutory reason (specify).

Purchaser assumes all liability for payment of the tax if the property purchased is used or consumed in such a manner as to render the sale of said property subject to tax. Should the State refuse to honor this certification and assess sales or use tax against Shamrock Chicago, the undersigned will reimburse Shamrock Chicago Corp. the amount of such tax, penalties and interest.

State: Registration Number: Purchasers:
By Title
SIGNATURE (For printing and mailing) DATE
Place any comments or questions here:

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