



Fortune Products, Inc.
2010A Windy Terrace
Cedar Park, TX 78613

This section to be completed by Fortune Requestor.

New Account Profile Company Name: _____
 Customer Update/Change* DBA or Trade Name: _____
* Include notification of needed change.
Requestor: _____ Date _____

The following section to be completed by vendor and submitted with the identified required documents above.

Contact information:

Buyer/Salesperson: _____ **Company Website:** _____
Telephone: _____
E-mail: _____
Address to be used on Sales Order: _____
City/State/Zip: _____
Country: _____
Telephone: _____ Fax: _____ Email: _____

Shipping Contact:

Shipping / Return Address: _____
City/State/Zip: _____
Telephone: _____ Email: _____
Preferred Shipping Provider: _____ ACCT #: _____

Accounts Payable Contact:

Address: *(if different from above)* _____
City/State/Zip/Country: _____
Email for invoices: _____ **AP Telephone:** _____
Payment Terms: _____



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Type of Business

Business Entity SOLE PROPRIETORSHIP PARTNERSHIP CORPORATION OTHER (LLC, Etc.)

Years in Business (This Name)		Number of Employees		Number of Salespeople ___ INSIDE ___ OUTSIDE		Warehouse Area (Sq.Ft.)
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Sales Entity WHOLESALE RETAILER JOBBER OTHER (Please Explain)

Describe your general lines of merchandise:

What geographical area do you service?

Owners & Principals

Name			Title		
Name			Title		
Address			Address		
City	State	Zip	City	State	Zip

Trade References

Trade Ref #1	Address	City	State	Zip
Contact/Title	Years Associated	Phone	Fax	

Type of products purchased:

Trade Ref #2	Address	City	State	Zip
Contact/Title	Years Associated	Phone	Fax	

Type of products purchased:

Trade Ref #3	Address	City	State	Zip
Contact/Title	Years Associated	Phone	Fax	

Type of products purchased:

Please be as complete as possible. This application will be used to establish your qualifications to buy direct from us and to qualify your company to purchase on an open account basis. No sales will be made to your company until we are in possession of a completed copy of this form and any other forms which may accompany it. Company named above claims the right to make non-taxable purchases for the purpose of re-sale under the State tax or license # shown above.

SIGNATURE _____ TITLE _____ DATE _____