

DLS**Retreading, Inc.****Where Customer Service is Priority #1****Commercial Cash Account Setup Form****(Non-Credit Account)****Business Information**

Firm Name: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____

Phone: _____ Fax: _____

Email Address: _____

Federal ID# or SS#: _____

Tax Exempt Y/N _____ (If Yes, you must supply a proper Sales Tax Exempt Certificate)

Contact Person: _____ Title: _____

Would you like a copy of your invoices automatically sent to your email address above? Y/N _____

Internal Use Only

Account Salesman # _____

Please email to david.ceremuga@dlsretreading.com, or fax to 864-252-4533, or mail to
DLS Retreading, Inc. 50 St. Mark Road, Taylors, SC 29687