

Fax the completed form to 419-241-0670 or email it to Accounting at Accounting @burkett.com

Government Customer Application

Customer Legal Name and DBA (if applicable)		
Phone	Alternate Phone	Fax
Purchasing Contact & Email		Accounts Payable Contact & Email
Billing Address	City, State	Zip Code
Shipping Address (if different)	City, State	Zip Code
Type of Business (C, SP, P, LLC)	EIN/Federal Tax ID	D&B Number
Initial Order Amount	Credit Line Requested	Tax Exempt Y/N (attach certificate)
application is true and correct and hereby deem necessary to arrive at a credit decisi	authorized representative for the custome authorizes Burkett Restaurant Equipment on. By signing below, the customer authover updating, renewing or extending credit	r, verifies that all information provided within this to obtain from third parties any information that we orizes us to review their business credit profile tin the future or collecting resultant accounts. A
Signature	Print Name and Title	 Date Signed