



10720 Sandhill Rd Dallas, TX 75238

NEW DEALER APPLICATION FORM

Dear Customer,

Thank you for choosing us as your new vendor. To open an account with us, please email us a copy of the following along with the application to info@kmawholesale.net.

* State Sales & Use Tax Permit, Valid ID, and Occupancy Permit.

Legal Business Name: _____

DBA: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email Address: _____

Buyers Name: _____

Accounts Payable Contact: _____

Sole Proprietor: _____ Corporation: _____ LLC: _____

Date Established _____ Years in Business _____

Names of Officers: _____

Signature of Company Officer

Title

Print Name

Date



01-339
(Rev. 4-13/8)

Texas Sales and Use Tax Resale Certificate

Name of purchaser, firm or agency as shown on permit	Phone (Area code and number)
Address (Street & number, P.O. Box or Route number)	
City, State, ZIP code	
Texas Sales and Use Tax Permit Number (must contain 11 digits) <input type="text"/>	
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico <input type="text"/> (Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)	