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# CONFIDENTIAL ACCOUNT APPLICATION

ALL THE FOLLOWING TO BE PRINTED

Date: \_\_\_\_\_  
Legal Name: \_\_\_\_\_  
Trade Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Phone No: \_\_\_\_\_  
Fax No: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

COMPANY:  Incorporated  Limited Liability Company  Partnership  Sole Proprietorship

Years in Business: \_\_\_\_\_ No. of Employees: \_\_\_\_\_

Nature of your business: \_\_\_\_\_

What Type of Products/Brands Do You Carry: \_\_\_\_\_

Do you Manufacture any Products:  No  Yes .....Please Explain: \_\_\_\_\_

Comments: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Submit Via E-mail to sales@luxcraft.com