

## House Account Application

(All fields are required. Incomplete or false information listed on this application will result in termination of the account.)

Fax to: 773-871-7434

Customer Name:		
Business (House Account) Name:		
Home (Billing) Address:		
City:	State:	ZIP:
Business Phone:	Home Phone:	
Fax:	E-Mail:	
Credit Card to be billed: <input type="checkbox"/> AMEX <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover		
Name of Account Holder*:		Expiration: __/__/__
Billing Address [If different from above]:		
Credit Card Number: _____		
*Note that your card issuer may provide us with updated card account information		

YOU WILL BE BILLED AND PAY WEEKLY FOR ALL ACTIVITY GENERATED THROUGH YOUR DESIGNATED UPRINTHUB.COM ACCOUNT.

Center is defined as The UPS Store 4569.

You hereby authorize the Center to charge the balance shown on the House Account Statement each week to the credit card indicated above on or before the following the Statement date. This authorization shall continue until you notify the Center otherwise in writing or upon the cancellation of your House Account by either the Center or you.

Center will issue House Account Card(s) to identify Customer's ("you" or "your") House Account pursuant to your instructions above. You will be sent a statement of House Account charges to the address indicated above for each billing period. If you provide us with your email address and/or mobile phone number below, we can also provide the statement to you via email or text. You acknowledge responsibility to pay an amount equal to the total of all purchases and charges reflected on the House Account Statement, whether incurred by you or, as applicable, by (i) an individual authorized by you above or (ii) any person in possession of the Card.

In the event that a charge is rejected or a check is returned for any reason, you agree to make full and prompt payment immediately upon receipt of notice. You are responsible for and will reimburse any fees or charges incurred by the Center as a result of a rejected charge or returned check.

Interest at the rate of 1.5% per month will be assessed on the total of any amounts not paid within thirty (30) days of the statement date. You agree to pay any and all costs, including reasonable attorneys' fees, incurred by the Center in an attempt to collect any outstanding balances(s). The Center may, in its sole discretion, suspend or cancel any House Account with a balance unpaid more than 30 days after the statement date.

This credit card authorization does not constitute an agreement to provide, nor is it intended to imply the existence of, any extension of credit or any credit options. The Center may, at its discretion, restrict charges on this House Account in general or with respect to any type of products and/or services. The Center may also cancel this agreement at any time for any reason by giving written notice to you, at which time all amounts then outstanding shall be due and payable immediately.

By signing this document, you agree fully to the above conditions without exception.

Fax this signed document to 773.871.7434 upon completion.

Customer Signature:	Date:
Printed Name:	Title:
By providing your mobile phone number or email address below, you consent that we may provide House Account statements to you via text or email. Your mobile carrier may assess charges to you as a result of such a text message (message and data rates may apply).	
Mobile Phone # ____-____-____	Email Address:



## Illinois Department of Revenue

# CRT-61 Certificate of Resale (Sales and Related Taxes, Fees, and E911 Surcharge)

A Certificate of Resale is a statement signed by the purchaser that indicates the merchandise purchased is for resale purposes only. **Note:** It is the seller's responsibility to verify that the purchaser's retailer or reseller Illinois account ID number is valid and active. You can confirm this by using the Verify a Registered Business link at [mytax.illinois.gov](https://mytax.illinois.gov). This system allows you to inquire whether a business is registered with the Illinois Department of Revenue (IDOR) and how that business is registered.

### Step 1: Identify the seller

Name The UPS Store 4569

Address 4044 N Lincoln Ave

City Chicago State IL ZIP 60618

### Step 2: Identify the purchaser

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Complete the information below. Check only one box.

- ☐ The purchaser is registered as a retailer or reseller with IDOR. Account ID number \_\_\_\_ - \_\_\_\_ .
- ☐ The purchaser is an out-of-State purchaser authorized to do business out-of-State and not required to be registered as a retailer or reseller in Illinois and will resell and deliver this property only to purchasers located outside the State of Illinois. Enter the other state name and account/registration number: \_\_\_\_\_ (or attach copy of registration to Form CRT-61). See instructions.

If making a blanket certificate, skip to Step 4 or 5.

### Step 3: Describe the property

Describe the property that is being purchased for resale or list the invoice number and the date of purchase.

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For a blanket certificate to qualify, the purchaser must complete Step 4 or 5. See instructions for more information.

### Step 4: Complete for full blanket certificates

- ☐ I am the identified purchaser, and I certify that all of the purchases that I make from this seller are for resale.

### Step 5: Complete for percentage blanket certificates

- ☐ I am the identified purchaser, and I certify that the following percentage, \_\_\_\_\_ %, of all of the purchases that I make from this seller are for resale. List the item: \_\_\_\_\_

**Note:** This is for use only with single item type purchases, such as cooking oil used in preparing foods. See instructions.

### Step 6: Purchaser's signature

I certify that I am purchasing the property in Step 3, Step 4, or Step 5 from the stated seller for the purpose of resale. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe tax based on each item's purchase price or as otherwise provided by law.

I understand misuse or misrepresentation may also result in penalties, interest, and criminal prosecution.

Purchaser's signature \_\_\_\_\_

Email address \_\_\_\_\_

Date     /     /    

Printed name \_\_\_\_\_

Phone \_\_\_\_\_