

# ScreenPlay New Distributor Application

## Questionnaire

What type of business relationship are you looking to form with ScreenPlay? Check all that apply:

1. One time order
2. Just looking for a bid right now.
3. Permanent Long Term Outsourcing Partner
4. Backup for your current screen-printing or embroidery operation

What are your current screen-printing/embroidery sales per year \_\_\_\_\_

How many orders do you average per month \_\_\_\_\_

What is the minimum number of pieces/\$ amount you will accept as an order?

\_\_\_\_\_

What is your average order size? \_\_\_\_\_

Are you willing to submit your orders through our online system? \_\_\_\_\_

Are you willing to approve pricing and E-Proofs online? \_\_\_\_\_

Would you be shipping your orders or will calling them? \_\_\_\_\_

How often do you require physical samples? \_\_\_\_\_

How often do you have repeat orders? \_\_\_\_\_

## Business Information

Company Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Business: \_\_\_\_\_ EIN or TIN: \_\_\_\_\_

ASI # \_\_\_\_\_ PPAI # \_\_\_\_\_

Years in Business: \_\_\_\_\_ Nature of Business: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

Email to send invoices & statements: \_\_\_\_\_

Estimated Monthly Purchases: \_\_\_\_\_

**Ownership Information**

Principle Owner: \_\_\_\_\_

Personal Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cel Number: \_\_\_\_\_

Additional Owner: \_\_\_\_\_

Personal Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cel Number: \_\_\_\_\_

**Third Party Shipping Information**

UPS Account Number: \_\_\_\_\_

Zip Code associated with UPS Account: \_\_\_\_\_

(If you request any other shipping method other than UPS, then you agree to all additional ScreenPlay handling charges that may apply.)

**Username & Passwords Request for our online system**

(All orders placed with ScreenPlay require online proof and pricing approvals prior to production)

Name of User: \_\_\_\_\_ User's Cell Number: \_\_\_\_\_

Username: \_\_\_\_\_ Password: \_\_\_\_\_

Name of User: \_\_\_\_\_ User's Cell Number: \_\_\_\_\_

Username: \_\_\_\_\_ Password: \_\_\_\_\_

Name of User: \_\_\_\_\_ User's Cell Number: \_\_\_\_\_

Username: \_\_\_\_\_ Password: \_\_\_\_\_

# Credit Card Information

ScreenPlay requires a credit card to be on file for all of its customers. Your credit card will only be charged if your account is past due or whenever your invoice payment is due. Payment is due on completion of an order, and prior to shipping the order, unless payment terms have been established. Terms are only offered to customers after a grace period of 5 successfully completed credit card payments.

## CREDIT CARD INFORMATION

Name on Credit Card: \_\_\_\_\_ Company Name \_\_\_\_\_

Type of Credit Card: VISA | MASTERCARD | AMEX | DISCOVER

Type of Account: Personal | Business

Credit Card Number: \_\_\_\_\_ V-Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## AUTHORIZATION OF CARD USE

I certify that I am the authorized holder and signer of the credit card reference above. I certify that all information above is complete and accurate.

I hereby authorize collection of payment for all charges as indicated above. Charges may not exceed the amount listed above in the "AUTHORIZED AMOUNT" field. If additional charges are going to be authorized a new form will have to be completed.

Cardholder Name: \_\_\_\_\_

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

## Terms and Conditions of Sale

All orders are subject to the terms of sale as set forth on the invoice. Accounts are considered past due if not paid by the date as stated on the invoice and are subject to finance charges of 1.5% per month (18% per annum). Screenplay reserves the right to limit or deny the extension of credit to Purchaser at its sole discretion and without recourse to the Purchaser and without notice to the Purchaser. The invoice shall become a binding contract for the purchase of the entire quantity of merchandise and services described therein. Customer agrees to pay any/all costs of collection due to the failure to pay in accordance with the terms of the invoice including service of process fees, costs of suit, and reasonable attorneys' fees.

I hereby agree to the terms and conditions of sale and authorize Screenplay to order any credit, financial, or background information necessary to establish credit. The reports can be ordered on me or my company. A photocopy, fax or email of this authorization is to be accepted with the same authority as the original.

I certify that all information attained in this credit application is true and correct.

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_



Utah State Tax Commission  
**Exemption Certificate**  
 (Sales, Use, Tourism and Motor Vehicle Rental Tax)

**TC-721**  
 Rev. 12/07

Name of business or institution claiming exemption (purchaser)		Telephone Number	
Street Address	City	State	ZIP Code
Authorized Signature	Name (please print)	Title	
Name of Seller or Supplier:			Date

The person signing this certificate **MUST** check the applicable box showing the basis for which the exemption is being claimed. Questions should be directed (preferably in writing) to Taxpayer Services, Utah State Tax Commission, 210 N 1950 W, Salt Lake City, UT 84134. Telephone (801) 297-2200, or toll free 1-800-662-4335.

**DO NOT SEND THIS CERTIFICATE TO THE TAX COMMISSION**  
 Keep it with your records in case of an audit.

For purchases by government, Native American tribes and public schools, use form TC-721G.

**RESALE OR RE-LEASE**  
**Sales Tax License No.** \_\_\_\_\_  
 I certify I am a dealer in tangible personal property or services that is for resale or re-lease. If I use or consume any tangible personal property or services I purchase tax free for resale, or if my sales are of food, beverages, dairy products and similar confections dispensed from vending machines (see Rule R865-19S-74), I will report and pay sales tax directly to the Tax Commission on my next sales and use tax return.

**LEASEBACKS**  
 I certify the tangible personal property leased satisfies the following conditions: (1) the property is part of a sale-leaseback transaction; (2) sales or use tax was paid on the initial purchase of the property; and, (3) the leased property will be capitalized and the lease payments will be accounted for as payments made under a financing arrangement.

**AGRICULTURAL PRODUCER**  
 I certify the items purchased will be used primarily and directly in a commercial farming operation and qualify for the Utah sales and use tax exemption.

**COMMERCIAL AIRLINES**  
 I certify the food and beverages purchased are by a commercial airline for in-flight consumption; or, any parts or equipment purchased are for use in aircraft operated by common carriers in interstate or foreign commerce.

**COMMERCIALS, FILMS, AUDIO AND VIDEO TAPES**  
**Sales Tax License No.** \_\_\_\_\_  
 I certify that purchases of commercials, films, prerecorded video tapes, prerecorded audio program tapes or records are for sale or distribution to motion picture exhibitors, or commercial television or radio broadcasters. If I subsequently resell items to any other customer, or use or consume any of these items, I will report any tax liability directly to the Tax Commission.

**FILM, TELEVISION, VIDEO**  
 I certify that purchases, leases or rentals of machinery or equipment will be used by a motion picture or video production company for the production of media for commercial distribution.

**POLLUTION CONTROL FACILITY**  
**Sales Tax License No.** \_\_\_\_\_  
 I certify our company has been granted a "Certification of Pollution Control Facilities" as provided for by Utah Code §§19-2-123 through 19-2-127 and as explained in Tax Commission Rule R865-19S-83 by either the Air Quality Board or the Water Quality Board. I further certify each item of tangible personal property purchased under this exemption is qualifying machinery or equipment for this purpose.

**MEDICAL EQUIPMENT**  
 I certify the equipment or device checked below is prescribed by a licensed physician for human use.

- Durable Medical Equipment primarily used to serve a medical purpose, is not worn in or on the body, and is for home use only. (Sales of spas and saunas are taxable.)
- Mobility Enhancing Equipment primarily used to increase the ability to move from one place to another, is for use in a home or motor vehicle and is not used by persons with normal mobility.
- Prosthetic Device used to replace a missing portion of the body, to prevent or correct a physical deformity/malfunction or support a weak or deformed portion of the body. (Sales of corrective eyeglasses and contact lenses are taxable.)
- Disposable Home Medical Equipment or Supplies that cannot withstand repeated use and purchased by, for, or on behalf of a person other than a health care facility, health care provider or office of a health care provider. The equipment and supplies must be eligible for payment under Title XVIII, federal Social Security Act or the state plan for medical assistance under Title XIX, federal Social Security Act.

**CONSTRUCTION MATERIALS PURCHASED FOR RELIGIOUS AND CHARITABLE ORGANIZATIONS**  
 I certify the construction materials purchased are on behalf of a religious or charitable organization. I further certify the purchased construction materials will be installed or converted into real property owned by the religious or charitable organization.  
 Name of religious or charitable organization: \_\_\_\_\_

**Sales Tax Exemption No.** **N** \_\_\_\_\_  
 Name of project: \_\_\_\_\_

**ENERGY-RELATED EQUIPMENT**  
**Sales Tax License No.** \_\_\_\_\_  
 I certify the machinery or equipment leased or purchased will be used to create or expand the operations of a renewable energy production facility, a waste energy production facility, or a facility that produces fuel from biomass energy.

**FUELS, GAS, ELECTRICITY**  
**Sales Tax License No.** \_\_\_\_\_  
 I certify all natural gas, electricity, coal, coke, and other fuel purchased will be used for industrial use only and not for residential or commercial purposes.

**MUNICIPAL ENERGY**  
**Sales Tax License No.** \_\_\_\_\_

I certify the natural gas or electricity purchased: is for resale; is prohibited from taxation by federal law, the U.S. Constitution, or the Utah Constitution; is for use in compounding or producing taxable energy; is subject to tax under the Motor and Special Fuel Tax Act; is used for a purpose other than as a fuel; is used by an entity exempted by municipal ordinance; or is for use outside a municipality imposing a municipal energy sales and use tax. The normal sales tax exemptions under Utah Code §59-12-104 do not apply to the Municipal Energy Sales and Use Tax.

**STEEL MILL**  
**Sales Tax License No.** \_\_\_\_\_

I certify the rolls, rollers, refractory brick, electric motors or other replacement parts will be used in the furnaces, mills or ovens of a steel mill as described in Standard Industrial Code (SIC) 3312.

**RESEARCH AND DEVELOPMENT OF COAL-TO-LIQUID, OIL SHALE AND TAR SANDS TECHNOLOGY**  
**Sales Tax License No.** \_\_\_\_\_

I certify the tangible personal property purchased will be used in research and development of coal-to-liquids, oil shale, and tar sands technology.

**MAILING LISTS**  
**Sales Tax License No.** \_\_\_\_\_

I certify the printed mailing lists or electronic databases are used to send printed material that is delivered by U.S. mail or other delivery service to a mass audience where the cost of the printed material is not billed directly to the recipients.

**MACHINERY AND EQUIPMENT AND NORMAL OPERATING REPAIR OR REPLACEMENT PARTS USED IN A MANUFACTURING FACILITY OR MINING ACTIVITY**  
**Sales Tax License No.** \_\_\_\_\_

I certify the machinery and equipment and normal operating repair or replacement parts purchased have an economic life of three years or more and are for use in a Utah manufacturing facility described within the SIC Codes of 2000-3999, in a qualifying scrap recycling operation, or in a cogeneration facility placed in service on or after May 1, 2006, or in an establishment described in NAICS 212, Mining (except Oil and Gas), or NAICS 213113, Support Activities for Coal Mining, NAICS 213114, Support Activities for Metal Mining, or NAICS 213115, Support Activities for Nonmetallic Minerals (except Fuels) Mining. **The mining exemption also includes equipment used in research and development.** Failure to report these purchases on the information line of the sales and use tax return may subject the filer to a penalty equal to the lesser of \$1,000 or 10 percent of the sales and use tax that would have been imposed if the exemption had not applied.

**SEMICONDUCTOR FABRICATING, PROCESSING, OR RESEARCH AND DEVELOPMENT MATERIAL**  
**Sales Tax License No.** \_\_\_\_\_

I certify the fabricating, processing, or research and development materials purchased are for use in research or development, manufacturing, or fabricating of semiconductors. Failure to report these purchases on the information line of the semiconductor manufacturer's sales and use tax return may subject the semiconductor manufacturer to a penalty equal to the lesser of \$1,000 or 10 percent of the sales and use tax that would have been imposed if the exemption had not applied.

**RELIGIOUS OR CHARITABLE INSTITUTION**  
**Sales Tax Exemption No.** **N** \_\_\_\_\_

I certify the tangible personal property or services purchased will be used or consumed for essential religious or charitable purposes. **This exemption can only be used on purchases totaling \$1,000 or more, unless the sale is pursuant to a contract between the seller and purchaser.**

**SKI RESORT**  
**Sales Tax License No.** \_\_\_\_\_

I certify the snowmaking equipment, ski slope grooming equipment or passenger ropeways purchased are to be paid directly with funds from the ski resort noted on the front of this form.

**TOURISM/MOTOR VEHICLE RENTAL**

I certify the motor vehicle being leased or rented will be temporarily used to replace a motor vehicle that is being repaired pursuant to a repair or an insurance agreement; the lease will exceed 30 days; the motor vehicle being leased or rented is registered for a gross laden weight of 12,001 pounds or more; or, the motor vehicle is being rented or leased as a personal household goods moving van. This exemption applies only to the tourism tax (up to 7 percent) and the short-term motor vehicle rental tax (Transportation Corridor Funding – 2.5 percent) – not to the state, local, transit, zoo, hospital, highways, county option or resort sales tax.

**TELECOMMUNICATIONS EQUIPMENT, MACHINERY OR SOFTWARE**  
**Sales Tax License No.** \_\_\_\_\_

I certify these purchases or leases of equipment, machinery, or software, by or on behalf of a telephone service provider, have a useful economic life of one or more years and will be used to enable or facilitate telecommunications; to provide 911 service; to maintain or repair telecommunications equipment; to switch or route telecommunications service; or for sending, receiving, or transporting telecommunications service.

To be valid this certificate must be filled in completely, including a check mark in the proper box.

**A sales tax license number is required only where indicated.**

Please sign, date and, if applicable, include your license or exemption number.

**NOTE TO SELLER:** Keep this certificate on file since it must be available for audit review.

**NOTE TO PURCHASER:** Keep a copy of this certificate for your records. You must notify the seller of cancellation, modification, or limitation of the exemption you have claimed.

If you need an accommodation under the Americans with Disabilities Act, contact the Tax Commission at (801) 297-3811 or TDD (801) 297-2020. Please allow three working days for a response.

**DO NOT SEND THIS CERTIFICATE TO THE TAX COMMISSION**  
**Keep it with your records in case of an audit.**