

Piedmont Research Center



Buyer Set-Up Form

Federal ID/Social Security Number: _____

Tax Exempt Number: _____

** Tax Exempt Certificate must be forwarded electronically or by fax. **

Purchase From Information:

Company Name: _____

Company Legal Name: _____

Physical Address (line 1): _____

Physical Address (line 2): _____

Post Office Box: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

Phone: _____ Fax: _____

Email: _____

Web Site (URL): _____

Remit To Information:

Company Name: _____

Company Legal Name: _____

Physical Address (line 1): _____

Physical Address (line 2): _____

Post Office Box: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

Phone: _____ Fax: _____

Email: _____

Web Site (URL): _____