

TRITTER FEEFER

Date: _____

Account Application

PO Box 4500 • LaGrange, GA 30241
Phone: 706-885-0242 Fax: 706-885-0243
info@tritterfeefer.com www.tritterfeefer.com

Thank you for your interest in the Tritter Feefer Home Collection.
Please complete this Account Information Sheet,
the Terms and Conditions of Sale and Finish Samples Order Form.

Please email to orders@tritterfeefer.com or fax to our number above.

Billing

Contact: _____
Company: _____
Address: _____
City: _____
State/Zip: _____
Phone: _____
Fax: _____

Furniture Order Shipping/Receiver

Contact: _____
Company: _____
Address: _____
City: _____
State/Zip: _____
Phone: _____

Please provide below with the name, title and email addresses of individuals in your firm

Name: _____ Title: _____ Email: _____
Name: _____ Title: _____ Email: _____
Name: _____ Title: _____ Email: _____
Name: _____ Title: _____ Email: _____

A little more scoop about you.....

Year established: _____ Annual Sales: _____ How many designers are employed at your firm? _____
Website address: _____ Major Upholstery Vendor: _____
Do you have a retail store? _____ Major Casegoods Vendor: _____

Minimum Opening Order

Our opening order is for the purchase of our Finish Samples Deck for \$50.
See attached Finish Samples Order Form to complete
and return to orders@tritterfeefer.com.

Customer Signature _____

Signature acknowledges receipt of Terms and Conditions of sale
by Tritter Feefer Home Collection and Product Warranty

