



Account Setup Complex

FOR OFFICE USE ONLY: ACCT ID: _____ SALES REP: _____
--

Select which company(s) to setup  Floor Covering     Floor Cleaning

\_\_\_\_\_  
Property Name

\_\_\_\_\_  
Address (Street)

\_\_\_\_\_  
(City/State)

\_\_\_\_\_  
(Zip)

\_\_\_\_\_  
Complex Phone Number

\_\_\_\_\_  
Email

\_\_\_\_\_  
Manager Name

\_\_\_\_\_  
Property Management Company Name

Billing Information (check all that apply):

Tax Exempt. If so, please attach Reseller permit.