



Barbara Elster's

# MINIATURE CORNER INC.

7313 Duvan Drive, Tinley Park, IL 60477-3712 USA  
Phone (708) 429-4455 - Fax (708) 429-4244

## New Account Application

Reutter Porcelain



of North America  
Made in Germany  
Porcelain Giftware Division of  
Miniature Corner Inc.

Please complete areas  
**A thru E**  
and return

**A**

Please Print or Type

**Billing**

Company Name (as filed with your state/province) \_\_\_\_\_ Years at this address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Billing Address (as filed with your state/province) \_\_\_\_\_ FAX ( ) \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Post Code \_\_\_\_\_ Country \_\_\_\_\_

Web Site Address \_\_\_\_\_ E-mail Address \_\_\_\_\_

**B**

**Contacts**

The following information must be provided. It will be held in the strictest confidence.

Corporation     Partnership     Individual

State Resale Tax # - Business License # \_\_\_\_\_

1) \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Name of Owner or Principal

2) \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Name of Manager or Primary Contact

**C**

**Shipping**

Shipping Name (Enter SAME if Billing & Shipping Address are the same) \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Shipping Address \_\_\_\_\_ FAX ( ) \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Post Code \_\_\_\_\_ Country \_\_\_\_\_

**D**

**Vendor References**

1) \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
\* Vendor Reference / Address & Account Number

2) \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
\* Vendor Reference / Address & Account Number

3) \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
\* Vendor Reference / Address & Account Number

\* Only list vendor references for whom you have purchased from with in the past 12 months

**E**

**Signature**

I certify that all the above information on this application is correct. Note that submission of this application does not guarantee an account with Miniature Corner Inc. If approved you will be notified by fax or mail and given your account number. Please allow up to 2 weeks for account approval & your catalog literature to be mailed.

I have submitted my state resale tax / business license copy (Signed) \_\_\_\_\_

I have submitted my catalog fee (Print) \_\_\_\_\_

Check to be sure you have also completed these steps above (Date) \_\_\_\_\_