

EVANS DISTRIBUTION, INC.



Quality Architectural Aluminum Products
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Kawneer

AUTHORIZATION FORM

I hereby authorize information on my credit history to be released to
Evans Distribution, Inc.

Signed By: _____

Title: _____

Full Legal Name of Company: _____

State Resale Certificate No: _____

Date: _____

ATTENTION

**PLEASE ATTACH A COPY OF YOUR STATE
RESALE CERTIFICATE WITH APPLICATION**

(Application will not be processed if your certificate is not included)