

# Car Care Clinic

**JET LUBE** 

## TIRE & AUTOMOTIVE

**CAR WASH FULL SERVICE DETAILING**

**ROBERT R. TEWES**

*President*

Dear Fleet Manager,

Car Care Clinic is here to save your company time AND money by offering your company a Fleet Account. A Fleet Account with Car Care Clinic will qualify your company for a 10% discount on all automotive goods and services, except tires, at all our 14 convenient locations.

Car Care Clinic has 14 convenient locations to serve you:

BRANDON 601-824-4044  
1709 Highway 80 West  
Full Service Oil Change and Automotive Repair Shop

NORTH JACKSON 601-362-2244  
105 Triangle Drive  
Full Service Oil Change and Automotive Repair Shop

SOUTH JACKSON @ METRO CENTER 601-922-0644  
4406 Robinson Road  
Full Service Oil Change and Automotive Repair Shop  
*Car Wash and Detail Specialist*

RIDGELAND @ THE RESERVOIR 601-956-1544  
6564 Old Canton Road  
Full Service Oil Change and Automotive Repair Shop

I-55 NORTH JACKSON 601-981-1044  
4710 I-55 North Frontage Road  
Full Service Oil Change and Automotive Repair Shop  
*Car Wash and Detail Specialist*

VICKSBURG 601-636-3322  
4050 Pemberton Square Blvd.  
Full Service Oil Change Only

PEARL 601-932-8877  
135 South Pearson Road  
Full Service Oil Change and Automotive Repair Shop

FLOWOOD 601-919-0644  
1005 Lakeland Place  
Full Service Oil Change and Automotive Repair Shop

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FOREST 412 East Third Street Full Service Oil Change Only	601-469-2050
MAGEE 403 Pinoa Drive South East Full Service Oil Change Only	601-849-4049
MADISON 816 Hwy 51 Full Service Oil Change Only	601-856-3919
RIDGELAND @ HWY 51 334 Hwy 51 North Full Service Oil Change and Automotive Repair Shop	601-856-9609
FLOWOOD 2680 Lakeland Drive Full Service Oil Change and Automotive Repair Shop	601-933-1933
SOUTH JACKSON 5408 Robinson Road Extension Full Service Oil Change and Automotive Repair Shop	601-372-1248

Car Care Clinic has ASE Certified Technicians who are experts when it comes to tune ups, brakes, air conditioning, alignments, tires and most other repairs. Car Care Clinic's 35 years of dedication to service and quality means your company's satisfaction is guaranteed with Car Care Clinic Jet Lube.

To start simply fill out the short credit application and mail it to us. Or you can fax it to 601-936-4246. Just let us know what information you require and Car Care Clinic will set up a monthly corporate billing for your company. In turn you will receive a confirmation letter in a few days. We want your business! If you have any questions, call our office at 601-936-4744.

Sincerely,



Robert "Bob" Tewes  
General Manager

# Car Care Clinic



ROBERT R. TEWES  
President

## Confidential Business Credit Application

Date: \_\_\_\_\_

Company (Name on Billing) \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Mailing Address (If Different from above) \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Type of Business \_\_\_\_\_ Established \_\_\_\_\_

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_

Name of Principal Stockholder \_\_\_\_\_

Is your business tax exempt? Yes \_\_\_\_\_ No \_\_\_\_\_

Resale # \_\_\_\_\_ Please include a copy of your sales tax certificate.

Business References (Name, City and Phone Number)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_

Bank Phone Number (\_\_\_\_\_) \_\_\_\_\_ Loan Officer \_\_\_\_\_

This is to certify that our firm is financially able to meet any commitments we have made and to pay our invoices according to your terms of net 30 days. All accounts classified, as past due will be placed on C.O.D. basis only until the account is returned to a current status and /or the credit line is reevaluated. Purchaser to pay all costs of collection, including a reasonable attorney's fee, should legal action be necessary.

Signed \_\_\_\_\_ Date \_\_\_\_\_

(Owner or Officer)

703 AIRPORT ROAD FLOWOOD, MS 39232 (601) 936-4744 FAX (601) 936-4246  
Title \_\_\_\_\_

# Car Care Clinic



ROBERT R. TEWES  
President

## Billing Information

Will persons charging on this account need to provide identification?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If so, what do you require on your receipts? \_\_\_\_\_

Do you require license tag number on your receipts? \_\_\_\_\_ Yes \_\_\_\_\_ No

Approximately how many and what kind of vehicles will you have serviced?

\_\_\_\_\_ Cars Only                      \_\_\_\_\_ No. of Vehicles

\_\_\_\_\_ Trucks Only                      \_\_\_\_\_ No. of Vehicles

\_\_\_\_\_ Varies                              \_\_\_\_\_ No. of Vehicles

Do you require a Purchase Order from your office before work has begun?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Any other requirements? \_\_\_\_\_

Accounts Payable Contact \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_

E-Mail \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(Owner or Officer)

Title \_\_\_\_\_



# SALES TAX EXEMPTION CERTIFICATE

Store

Name of purchaser, firm or agency	Phone (including area code)
Address (Street & number, P O Box or Rte number)	Expiration Date (if applicable)
City, State, Zip Code	State of Exemption
Sales Tax Registration Number or Exempt Organization Number (if applicable)	
Principal business activity generally engaged in or types of items normally sold by purchaser	
Description of property being purchased	

The purchaser named above claims an exemption from sales tax for the following reason (check applicable box or boxes):

- PURCHASE FOR RESALE** *(FL - not applicable)*
- Purchase of tangible personal property for resale, lease or rent or use in performing taxable services within the geographical limits of the United States of America, its territories and possessions, where such property becomes a component part of the property upon which the services are performed and will be actually transferred to the purchaser.
- PURCHASE BY AGRICULTURAL PRODUCER**
- Purchase of tangible personal property for use or consumption in the commercial production of an agricultural product within the geographical limits of the United States of America, its territories and possessions.  
*(CT, ME, RI - state issued exempt status certification must be attached)*
- PURCHASE BY GOVERNMENT**
- US Government *(ND - state issued exempt status certification must be attached)*
- State Government *(ND - state issued exempt status certification must be attached)*
- Local Government *(ND - state issued exempt status certification must be attached)*
- PURCHASE BY EXEMPT ORGANIZATION**
- Church or other religious organization *(FL, MD, ME, MA, MN, MO, NE, NV, NJ, NY, OK, RI, TN, WY - state issued exempt status certification must be attached)*
- School or other educational organization *(FL, MD, ME, MN, MO, ND, NE, NV, NJ, NY, OK, RI, TN - state issued exempt status certification must be attached)*
- Charitable or other non-profit organization *(AL, CO, DC, FL, MA, MD, ME, MI, MN, MO, NE, NV, NJ, NY, OK, RI, TN, WY - state issued exempt status certification must be attached)*
- Other exempt organization \_\_\_\_\_  
list reason for exemption

By signing this certificate, the purchaser understands he/she may make tax free purchases of tangible personal property which are exempt within the geographical limits of the United States of America, its territories and possessions. The purchaser will pay sales or use tax on all tangible personal property used or consumed in a taxable manner. In addition, the purchaser understands he/she will be liable for the tax due, plus substantial penalties and interest, for any erroneous or false use of this certificate.

Authorized purchaser's signature	Title	Date

For office use only	
Certificate Deleted	Date Deleted
File deleted certificates in back of Tax Exempt Binder DO NOT THROW CERTIFICATES AWAY	

**THIS CERTIFICATE MUST BE MAINTAINED IN THE STORE IN A PERMANENT FILE**