



INSPIRED
SHADES™

Account Application (CA)

Phone: 330-562-0023

Fax: 928-447-1087

Email: inspired@prodesignllc.net

ePIC #:

(Office use only)

Please return this application to inspired@prodesignllc.net. If you own multiple franchises, please complete separate applications for each franchise for which you would like an account.

Section 1: Account Information

Date: _____ Primary Contact: _____ Franchise Number: _____ Budget Blinds of: _____

Billing Address: _____ City: _____ Province: _____ Post Code: _____

Shipping Address: _____ City: _____ Province: _____ Post Code: _____

Phone Number: _____

Section 2: Contact Information

Account Activation

Name: _____ Phone Number: _____ Email: _____

Order Submittal

Email: _____

Advance Ship Notification

Email: _____

Invoices/Financial

Email: _____

Section 3: Sample Books

Please select any sample books you would like to order.

- _____ Inspired Shades Roller Shades (\$205 CAD)
- _____ Inspired Shades Dual Sheer Shades (\$225 CAD)
- _____ Inspired Shades Drapery Fabric Deck (\$25 CAD)

Section 4: Pro Design LLC Contact Information

Office Contact

General Information: inspired@prodesignllc.net
 Orders: orders@prodesignllc.net
 Office Phone: 330-562-0023

Find Us Online!

www.Inspired-Shades.com
 www.Shop-Inspired-Shades.com



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Section 5: Method of Payment (please choose one)

Auto-Pay - please complete and sign payment form below.

- Credit Card
- Account Charged When Order Ships

Manage your own payments

- Mail In Checks

Section 6: Auto-Pay Authorization

Please complete this section only if you selected Auto-Pay as your preferred method of payment.

Credit Card Information

Date: Name on Card:

Billing Address: City: Province: Post Code:

Card Number: Security Code: Expiration Date:

By signing below, I am acknowledging that I am the account/credit card holder of the above mentioned account/ card. I authorize Pro Design, LLC the right to process payment of invoices unless I notify of any change. I understand that there will be no refunds and that all sales are final.

Signed:

Date CC details provided:



Section 7: Trade References

Trade Reference #1:

Address: _____ City: _____ Province: _____ Post Code: _____

Contact Person: _____ Title: _____ Phone Number: _____ Account Number: _____

Trade Reference #2:

Address: _____ City: _____ Province: _____ Post Code: _____

Contact Person: _____ Title: _____ Phone Number: _____ Account Number: _____

I expressly authorize all references on this application to release information concerning my credit history.

Print Name: _____ Signed: _____ Date: _____

I consent to and authorize Pro Design LLC to obtain credit and financial information from any source at any time, which may include a report from a credit-reporting agency.

Print Name: _____ Signed: _____ Date: _____