

# DEA AUTHORIZED BUYER FORM

Customer No. : \_\_\_\_\_

1. Customer:\*\* \_\_\_\_\_

Address: \*\* \_\_\_\_\_  
\_\_\_\_\_

Type Directly onto this form, then print and sign the form

If your address has changed please contact our office.

2. Please print or type each buyer's full name (first, initial, last) in the left hand column and have the buyer(s) sign and date in the right column.

**Print or Type Buyer's Name **	**Signature and Date required**

3. Please indicate which chemicals will be purchased:\*\* \_\_\_\_\_  
\_\_\_\_\_

4. Please indicate if you buy List I chemicals for resale: Yes  No   
If Yes please provide your DEA Registration Number: \_\_\_\_\_

5. What is the intended use for the chemical purchased: (list mixing/recipe)\*\* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(A process name will not work. Be very specific on line 5. Please use your mixing formula and usage directions.)

6. Please also send copy of a current photo ID Scanned via e-mail.\*\*  
An acceptable ID is a driver's license containing a picture and current street address. The Photo ID must be scanned and emailed to us at [formulary@blackfoot.net](mailto:formulary@blackfoot.net). Faxed ids will cause delays in the order as they are not readable and we have to wait for the emailed or snail mailed one to arrive.

7. Without complete information we can't process your order, all items with the double \*\* must be filled out.

## FAX WITHOUT COVER SHEET TO:

Photographers' Formulary, Inc.  
Order Office  
Fax (406) 754-2896

## OR MAIL TO:

Photographers' Formulary, Inc.  
Order Office  
PO Box 950  
Condon, MT 59826-0950

All \*\* asterisked\*\* items are required and must be completed before your order will be processed.