



## Request for [TriCityPaint.com](http://TriCityPaint.com) Password

Use this form to Request a Password to use your [TriCityPaint.com](http://TriCityPaint.com) account.

Shop Name: \_\_\_\_\_

Tri-City Account #: \_\_\_\_\_

Tri-City Paint Account Number contains 1 Letter and 4 numbers. Example: A0000

Desired Password: \_\_\_\_\_

Please Print. May be 4 to 10 characters - letters and/or numbers

E-mail Address: \_\_\_\_\_@\_\_\_\_\_

Important for us to respond to your orders - FORMAT: yourname@webservice.com

Print your name: \_\_\_\_\_

Signature: \_\_\_\_\_

I hereby certify that I am the business  Owner  Manager  Other Authorized Employee

Passwords will be setup in the system usually within 24 hours - during normal business hours, often within 2 hours.

For security reasons, we may need to call you to confirm that this request is valid and authorized.

Thank you for using  
[Tri-CityPaint.com](http://Tri-CityPaint.com)

Please print, complete and FAX this form to:  
**(858) 530-2579**