



Flexfit - New York

350 Karin Lane

Hicksville, NY 11801

PH: (800) 424-4464

FX: (516) 932-6221

Flexfit - California

625 Columbia St.

Brea, CA 92821

PH: (866) 941-2555

FX: (714) 447-9475

New Customer Application

Note: Incomplete and/or unsigned applications will not be processed. Please type or print.

Company Information

Corporate Name	<input type="text"/>	DBA	<input type="text"/>
Billing Address	<input type="text"/>	City, State, Zip	<input type="text"/>
Phone Number	<input type="text"/>	Fax Number	<input type="text"/>
Primary Contact	<input type="text"/>	Account Payable	<input type="text"/>
Date current ownership began	<input type="text"/>	Federal Tax ID#	<input type="text"/>
Resale #	<input type="text"/>	DNS#	<input type="text"/>
Please check one: Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/>			
Email Address:	<input type="text"/>	Ref by:	<input type="text"/>
List below the name Officers, Partners, or Sole Owner:			
Name	Title	Address	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Bank Reference

Name of bank	<input type="text"/>	Account #	<input type="text"/>
Address	<input type="text"/>	Officer	<input type="text"/>
City, State, Zip	<input type="text"/>	Phone #	<input type="text"/>

Trade Reference

Name	<input type="text"/>	Account #	<input type="text"/>
Address	<input type="text"/>	Phone #	<input type="text"/>
City, State, Zip	<input type="text"/>	Fax #	<input type="text"/>
Name	<input type="text"/>	Account #	<input type="text"/>
Address	<input type="text"/>	Phone #	<input type="text"/>
City, State, Zip	<input type="text"/>	Fax #	<input type="text"/>
Name	<input type="text"/>	Account #	<input type="text"/>
Address	<input type="text"/>	Phone #	<input type="text"/>
City, State, Zip	<input type="text"/>	Fax #	<input type="text"/>

Applicant's signature affirms financial responsibility for and willingness and ability to pay Flexfit's invoices. Applicant authorizes Flexfit, LLC to obtain information it considers necessary in considering this application. If the applicant is unable to pay for purchases when due, the applicant authorizes Flexfit to add interest (1.5% per month; 18% per annum) to the amount due. If Flexfit incurs additional collection costs, the applicant agrees to pay these collection costs, along with attorney's fees. Upon acceptance by Flexfit, LLC, this application constitutes a sale and purchase agreement. The information contained in this application is accurate.

Name	<input type="text"/>	Title	<input type="text"/>	Signature and Date	<input type="text"/>
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Terms Requested: C.O.D. Net 10 Net 30 Credit Line Requested \$

Credit Card Authorization

Card Type	Account Number	EXP	Security Code	Card Holder
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



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General Resale Certificate

I HEREBY CERTIFY:

1. I hold a valid seller's permit number

2. I am engaged in the business of selling the following type of tangible personal property:

3. This certificate is for the purchase from **Flexfit LLC.** of the item(s) I have listed in paragraph 5 below.

4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.

5. Description of property purchased for resale: **Headwear**

6. I have read and understand the following:

For Your Information: A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

Name of Purchaser Signature of Purchaser, Purchaser's Employee or Authorized Representative

Printed Name of Person Signing Title of Person Signing

Address of Purchaser

Telephone Number Date

COPY OF ACTUAL RESALE CERTIFICATE IS REQUIRED WITH THIS COMPLETED FORM