**Please complete all applicable fields. Fields marked * are required for account setup.**

For resale purchases, complete the attached California Resale Certificate and provide a valid seller permit number.

## 1. COMPANY & LEGAL INFORMATION

**Legal Business Name ***

**DBA / Trade Name**

**Business Type ***

Corporation | LLC | Partnership | Sole Proprietor | Other

**State of Formation**

**Year Established**

**Federal EIN / Tax ID**

**Website**

**Business / Corporate Address ***

**City ***

**State ***

**ZIP Code ***

**Country**

**Main Phone ***

**Fax**

**General Email**

## 2. KEY CONTACTS

**Buyer / Purchasing Contact ***

**Title**

**Phone**

**Email ***

**Accounts Payable Contact ***

**A/P Phone**

**A/P Email for Invoices ***

**Owner / Officer / Principal**

**Title**

**Phone**

**Email**

## 3. BUSINESS PROFILE

**Type of Business / Products Sold**

**Years in Business**

**Number of Locations**

**Sales Channels (Retail / Wholesale / Online / Other)**

**Estimated Annual Sales ($) - Optional**

## 4. BILLING, SHIPPING & RECEIVING

☐ Billing address is the same as company address

**Billing Address (if different)**

**City** | **State** | **ZIP Code** | **Country**

☐ Shipping address is the same as company address

**Ship-To Company / Location Name** | **Receiving Contact**

**Shipping Address**

**City** | **State** | **ZIP Code** | **Receiving Phone**

**Receiving Email** | **Receiving Hours / Days** | **Appointment / Lead Time**

**Receiving / Delivery Requirements**

**Facility / Delivery Notes**

☐ Dock available ☐ Forklift available ☐ Liftgate required ☐ Inside delivery required

## 5. TAX & ACCOUNT PREFERENCES

☐ Taxable ☐ Resale ☐ Other Exempt

**Seller Permit / Resale Number**

**Permit State** | **Invoice Delivery Email *** | **Purchase Order Required? PO / EDI / Portal**

☐ Yes ☐ No

**Statement Email (if different)** | **Invoice Format / Special Requirements**

**Preferred Order Method**

☐ Email ☐ Phone ☐ EDI / Portal ☐ Other

## 6. REQUESTED PAYMENT TERMS & CREDIT INFORMATION

☐ Prepaid ☐ COD ☐ Credit Card ☐ ACH / Wire ☐ Net 15 ☐ Net 30 ☐ Other

**Estimated Monthly Purchases ($)**

**Requested Credit Limit ($)**

**Expected First Order / Start Date**

**Trade References (recommended for open credit terms)**

| Company | Contact | Phone | Email |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Bank Reference (optional)**

**Bank Contact / Phone (optional)**

## 7. AUTHORIZED PURCHASERS

List employees authorized to place orders or approve purchases. Add additional names on a separate sheet if needed.

**Authorized Purchaser 1**

**Email**

**Phone**

**Authorized Purchaser 2**

**Email**

**Phone**

## 8. CERTIFICATION & AUTHORIZATION

I certify that the information provided in this application is true and complete. I authorize Living Water Trading Inc. to contact the trade and bank references listed above for account and credit verification. I agree to pay all invoices according to the terms approved by Living Water Trading Inc. Tax-exempt or resale treatment is subject to receipt of a properly completed and valid exemption or resale certificate. Credit terms, if granted, may be reviewed or changed at any time.

**Authorized Signer - Printed Name ***

**Title ***

**Date ***

**Signature ***

**Best Contact Email / Phone**

**REQUIRED ATTACHMENTS**

☐ Completed California Resale Certificate (attached)

☐ Copy of Seller Permit (if requested)

☐ Other exemption or supporting documents (if applicable)

### FOR LIVING WATER TRADING INC. INTERNAL USE ONLY

**Customer ID**

**Sales Rep**

**Approved Terms**

**Credit Limit**

BOE-230 (7-02)
**GENERAL RESALE CERTIFICATE**

STATE OF CALIFORNIA
BOARD OF EQUALIZATION

# California Resale Certificate

**I HEREBY CERTIFY:**

1. I hold 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 Living Water Trading Inc. [Vendor's name] 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 to be purchased for resale:

   Disposable gloves

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

ADDRESS OF PURCHASER

TELEPHONE NUMBER ( ) | DATE

CLEAR PRINT