

tel.909.606.9660
info@forcellusa.com
14171 Fern Ave
Chino, CA 91710

To Customer:

We appreciate your interest in purchasing from Forcell USA, Inc. and look forward to doing business. Please be advised, however, that we may require additional information in order to process your new account application. Please provide the following information:

- Resale Agreement.
- New Account Application.
- Copy of Business License and Resale Certificate.
- Trade References. (min. of 3) / Web site address if applicable.
- Signature of Owner/Company Representative.
- Store Images.(front of store and cosmetic section)

Please e-mail the requested information to my e-mail info@forcellusa.com which is the accounting department. If you have any further questions or concerns, please feel free to contact me at 1-909-606-9660

Thank you,

NEW ACCOUNT APPLICATION

Corporate Name _____
Doing Business As Name _____
Billing Address _____ Resale Tax ID# _____
City, State, Zip _____ Owner S.S.# _____
Shipping Address _____ Owner S.S.# _____
City, State, Zip _____
Contact _____ Estimated Monthly Volume _____
Phone _____ Fax _____ Email _____ Accounts Payable Contact:
Company In Business For _____ Present Ownership # Years _____ Name _____
Previous Business _____ Phone Number _____
Address _____ Email _____

Owners Name _____ Phone _____
Home Address _____ City _____ State _____ Zip _____
Owners Name _____ Phone _____
Home Address _____ City _____ State _____ Zip _____

Trade Reference _____ Your Acct# _____ Phone _____ Fax _____
Address _____ City _____ State _____ Zip _____
Trade Reference _____ Your Acct# _____ Phone _____ Fax _____
Address _____ City _____ State _____ Zip _____
Trade Reference _____ Your Acct# _____ Phone _____ Fax _____
Address _____ City _____ State _____ Zip _____

Bank Reference _____ Your Acct# _____
Address _____ Phone _____

ALL STATEMENTS MADE HEREIN ARE TRUE AND ACCURATE TO THE BEST OF MY/OUR KNOWLEDGE. I/WE AUTHORIZE THE ABOVE COMPANY TO MAKE ANY AND ALL INQUIRIES NECESSARY FOR ACTION ON THIS APPLICATION. I/WE HEREBY INDEMNIFY THE ABOVE COMPANY AND ITS AGENTS, FROM ANY LIABILITY RESULTING FROM THEIR CREDIT SURVEY.

Owner's Signature _____

TERMS

1. Payment Terms: 50% with purchase order, 50% when products are ready.
2. Payment method : Wire transfer only
3. EXW, CA warehouse.
4. Purchase order cannot be canceled for any reason, no refunds.
5. Return goods policy: All sales final, guarantee of expiration date of 12 Months.

Date _____ / _____

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 _____ of the item(s) I have listed in paragraph 5 below. [Vendor's name]

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:

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 _____
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