

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 _____
()

Oxumwear Credit Application

Studio/Boutique/Gym Name: _____

Address _____

City _____ State _____ Zip _____

Accounts Payable Contact / Owner _____

Phone _____ Fax _____ E-mail _____

Taxpayer ID (Resale #) _____

Bank Information

Bank Name _____

Address _____

City _____ State _____ Zip _____

Checking Account # _____ Savings Account # _____

Credit References

Company Name _____

Account # _____ Phone _____

Company Name _____

Account # _____ Phone _____

Company Name _____

Account # _____ Phone _____

We authorize the above listed references to release credit information concerning our account. We agree to conform to the published terms of the Vendor and to pay all collection expenses incurred by the Vendor in collecting past due amounts.

Authorized Signature _____ Date _____

Printed Name _____

Oxumwear Dealer Application

Studio/Boutique/Gym Name: _____

Primary Location _____

City _____ State _____ Zip _____

Contact / Buyer _____

Phone _____ Fax _____ E-mail _____

Primary Business Description _____

Years in Business _____

Owner(s) _____

Telephone #: _____ Email Address: _____

Telephone #: _____ Email Address: _____

Additional Locations (please list name, address, contact & telephone number)

Location 2 - _____

Location 3 - _____

Location 4 - _____

Location 5 - _____

Trade References

Company Name _____ Contact _____ Phone _____

Relationship _____

Products bought / represented _____

Company Name _____ Contact _____ Phone _____

Relationship _____

Products bought / represented _____

We authorize the above listed references to release information concerning our account. We understand that this information will only used for its intended purpose of showing business credibility and will held in the closest confidence.

Authorized Signature _____ Date _____

Printed Name _____