

NEW WHOLESALE APPLICATION

| 1. Legal company name: |
|--|
| 2. Type of company: |
| 3. Type of merchandise sold: |
| 4. Date Established DD/MM/YYYY: |
| 5. Local Tax Identification Number (eg. Sales Tax / VAT) : |
| 6. Federal Tax Identification Number: |
| 7. Full name of Company President / Owner: |
| 8. Full name (s) of authorized account users and relationship to the company (Limit 3) |
| a |
| b |
| C |
| 9. Company website (if applicable): http:// |

This application must be accompanied by a copy of tax identification.

By signing this application, the president or company owner states that all the information is true. Any false information will result in account termination. Also by signing this application you agree not to disclose any wholesale pricing to the public.

| President/Owner Signature | Date |
|---------------------------|------|
| | |

President/Owner Printed Name