



1201 Bell Ave, Tustin CA 92780
Phone: (714) 675-6100
Fax: (714) 675-6212

CREDIT APPLICATION

This form must be signed and
faxed back to (714) 675-6212!

APPLICANT INFORMATION		
Legal Business Name:		
Principal Name 1:	Title:	
Principal Name 2:	Title:	
Current address:		
City:	State:	ZIP Code:
Phone:	Fax:	Year Established:
Federal Tax ID:	ASI #:	PPAI #:
Estimate Annual Sales:	Payables E-mail:	
Corporation Partnership Sole Proprietor (Please circle)		
COMMERCIAL CREDIT REFERENCES		
Company Name:		
Contact Name:		
Full Address:		
Phone:	Fax:	E-mail:
Company Name:		
Contact Name:		
Address:		
Phone:	Fax:	E-mail:
Company Name:		
Contact Name:		
Address:		
Phone:	Fax:	E-mail:
Company Name:		
Contact Name:		
Address:		
Phone:	Fax:	E-mail:
BANK REFERENCE		
Bank Name:		
Contact Name:		
Address:		Phone:
City:	State:	ZIP Code:
Account Number:		
<p>Buyer agrees that if litigation of collection procedures must be instituted for collection of any unpaid balances due in this account, buyer will pay all costs of such efforts, including reasonable attorney's fees. All accounts more than 0 days past due invoice date shall be deemed past due and interest on said accounts shall accrue at the rate of 1.5 % per month, (18% per year).</p> <p>If any legal action must be initiated for any unpaid balances, buyer agrees that venue for such action shall be Orange County, State of California, notwithstanding that buyer may do business elsewhere, reside elsewhere, or that this agreement may be signed elsewhere.</p> <p>Buyer may cancel any order upon giving reasonable notice to seller, and upon payment by buyer of all reasonable charges based upon expenses already incurred, and commitments made by seller. All returns must be accompanied by an authorized Logomark RMA number.</p> <p>I authorize Logomark, Inc. to verify the information provided on this form as to company credit history.</p>		
Signature of Owner:		Date
Printed Name:		

BANK AUTHORIZATION FORM

(Please fax the completed form to Logomark Accounting Dept: 714/ 675-6212)

Attention:

Bank Name:

Bank Phone:

Bank Fax:

Account Number:

As required, I hereby authorize _____, to release any relevant information regarding our Company's bank account to Logomark, Inc. so that they can complete the review of our credit application. Please feel free to contact me at the following telephone number () _____ if you have any questions.

Sincerely,

Signature:

Date:

Name & Title:

Company Name:

UNIFORM SALES & TAX CERTIFICATE – MULTIJURISDICTION

The below-listed states have indicated that this form of certificate is acceptable, subject to the notes on pages 2-4. The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: **Logomark, Inc.**

Address: 1201 Bell Ave, Tustin, CA 92780

I certify that:

is engaged as a registered

Name of Firm (Buyer):

Wholesaler

Logomark, Inc.

Retailer

1201 Bell Ave.

Address:

Manufacturer

Tustin, CA 92780

Seller
(California)

Tel. (714) 675-6100

Lessor

Fax. (714) 675-6212

and is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients or components of a new product or service to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of Business: _____

General description of tangible property or taxable services to be purchased from the seller: Promotional products & Samples

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL	_____	MS	_____
AR	_____	MT	_____
AK	_____	NE	_____
AZ	_____	NV	_____
CO	_____	NJ	_____
CT	_____	NY	_____
DC	_____	NM	_____
DE	_____	NC	_____
FL	_____	ND	_____
GA	_____	NH	_____
HI	_____	OH	_____
ID	_____	OK	_____
IL	_____	OR	_____
IN	_____	PA	_____
IA	_____	RI	_____
KS	_____	SC	_____
KY	_____	SD	_____
LA	_____	TN	_____
MA	_____	UT	_____
ME	_____	VA	_____
MD	_____	VT	_____
MI	_____	WA	_____
MN	_____	WV	_____
MO	_____	WY	_____

I further certify that if any property or service so purchased tax free is used or consumed by the firm as to make it subject to a sales or Use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by the city or state.

Under penalties of perjury, I swear or affirm the information on this form is true and correct as to every material matter.

Authorized Signature: _____
(Owner, Partner or Corporate Officer)

Title: _____ Date: _____

STATE OF CALIFORNIA RESALE CERTIFICATE

PLEASE COMPLETE, SIGN, AND RETURN THIS RESALE CERTIFICATE FOR STATE OF CALIFORNIA IF YOU ARE LOCATED IN CALIFORNIA AND/OR IF YOU WILL EVER SHIP TO CALIFORNIA.

YOUR CALIFORNIA ORDER WILL BE TAXABLE IF WE DO NOT RECEIVE THIS CERTIFICATE.

FIRM NAME

HEREBY CERTIFY,

That I hold a valid seller's permit

No _____

issued pursuant to the Sales and Use Tax Law; That I am engaged in the business of selling

that the tangible personal property described herein which I shall purchase from;

Logomark, Inc.

will be resold by me in the form of tangible personal property; PROVIDED, however, that in the event of any such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by Sales and Use Tax Law to report and pay for the tax, measured by the purchase price of such property or other authorized amount.

Description of property to be purchased; PROMOTIONAL PRODUCTS & SAMPLES

Dated: _____

At: _____

Phone: _____

Signature: _____

By the Title: _____

Address: _____



LOGOMARK, INC.

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TEXAS RESALE CERTIFICATE

Name of purchaser, firm or agency	Phone (Area code and number)
Address (Street & number, P.O. Box or Route number)	
City, State, ZIP code	
Texas Sales or Use Tax Permit Number (or out-of-state retailer's registration number or date applied for Texas Permit – must contain 11 digits if from a Texas permit) <div style="border: 1px solid black; width: 250px; height: 20px; display: inline-block;"></div> (Mexican retailer's must show their Federal Taxpayers Registry (RFC) number on the certificate and give a copy of their Mexican registration form to the seller.)	

I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:

Seller: _____

Street address: _____

City, State, ZIP code: _____


Description of items to be purchased on the attached order or invoice:

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

The taxable items described above, or on the attached order or invoice, will be resold, rented, or leased by me within the geographical limits of the United States of America, its territories and possessions, or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease, or rental and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

 Purchaser	Title	Date
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This certificate should be furnished to the supplier. Do **not** send the completed certificate to the Comptroller of Public Accounts.