

Please Email to [sales@suppliesideusa.com](mailto:sales@suppliesideusa.com) or Fax Back To 800-955-2697  
For Any Questions, Please Call 800-284-7357

Date: \_\_\_\_\_

Account Status:  New  Existing (Acct #: \_\_\_\_\_ Date of Last Purchase: \_\_\_\_\_ )

Organization Is:  Corporation  LLC  Partnership  Proprietorship

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### Billing Information

Legal Name Of Company: \_\_\_\_\_

Dba: \_\_\_\_\_

Street Address (No P.O. Boxes): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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### Shipping Information (If Different From Billing)

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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### Credit Card Information

Cardholder Title: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Card Type: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

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Applications may be sent via Email to [sales@suppliesideusa.com](mailto:sales@suppliesideusa.com) or  
Fax directly to 1-800-955-2697





1120 West 130th Street, Brunswick, Ohio 44212  
Phone: 800-284-7357  
Fax: 800-955-2697

## Resale Certificate Document

State of \_\_\_\_\_

\_\_\_\_\_  
(Name of Purchaser)

\_\_\_\_\_  
(Address of Purchaser)

\_\_\_\_\_  
(State Tax I.D. #)

I **Hereby Certify**: that I hold valid seller’s permit No. \_\_\_\_\_  
(For states that do not charge sales tax, use EIN or Social Security Number – FILL IN ABOVE). 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:

**Supply Side USA, Inc., 1120 West 130th Street, Brunswick, Ohio 44212**

will be resold by me in the form of personal property; provided, however, that in the event 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 the Sales and Use Tax Law to report and pay tax, measured by the purchase price of  
such property or other authorized amount. Description of property to be purchased:

\_\_\_\_\_  
Date: \_\_\_\_\_

Signature of Purchaser or Authorized Agent: \_\_\_\_\_

Please Print Name: \_\_\_\_\_

Title: \_\_\_\_\_