GOLDEN GLASS
HARDWARE

1. Official business name: _____

2. Name of DBA (if applicable):_____

3. Do you have a sales tax exemption valid for kitchen and bath furniture and accessories?

    Yes   No

    If yes, provide number _____

4. Business street address: _____

    City: _____ State: _____ Zip: _____

5. Business phone no.: _____

6. Business Fax no.: _____

7. Business hours: _____

8. Website address (if applicable): _____

9. Company Email (to log into our ordering system): _____

10. Type of business (example-retail)_____

11. Principally engaged in the sale of : _____

12. Showroom address (if applicable): _____

    Same as business   City: _____ State: _____ Zip: _____

    Showroom hours: _____

13. Warehouse address (if applicable): _____

    Same as above   City: _____ State: _____ Zip: _____

14. Check off if you have one of the following:

    Forklift   Loading dock

15. The property described above is being purchased for (check all boxes that apply):
Resale in its present form.
Resale as converted into or as a component part of a product by the purchaser.
Use in the performance of a taxable service on personal property and will become part of the property being serviced or will later be transferred to the purchaser of the service in conjunction with the performance of the service.

16. I am purchasing:
Tangible personal property (other than motor fuel or diesel motor fuel) for resale, and it is being delivered directly by the seller to my customer or to an unaffiliated fulfillment services provider in
New York State.
Tangible personal property for resale that will be resold from a business located outside New York State

17. Accountant Name: _____

18. Accountant Email: _____

19. Accountant Phone: _____Ext: _____

20. Owner(s) Full Name: _____

21. Owner cellular: _____

22. Authorize person filling out form:_____
First   Last

23. Title of person filling out form: _____

I affirm that the details I provide are genuine and precise. Through utilizing the company website, I acknowledge and accept the terms and conditions outlined in the company's policy available on their website.

_____   _____
Print Name   Authorize Signature   Date

Required Documents:

1. **Sign NY ST-120 and NJ ST-3**

2. **Color Copy of State issue NJ Certificate of Authority**