

Restaurant Industry Supply Experts
1900 Camden Ave. Suite 100 #62
San Jose, CA 95124
Tel: 408-931-5909
fulfillment@risebayarea.net
www.risebayarea.net



FULFILLMENT
NETWORK

New Customer Application

Business Information:

Business Name: _____ DBA Name: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Type of Business: Corporation Partnership Sole Owner

How Long in Business: _____ If Incorporated, Date of Incorporation: _____

Federal ID Number: _____ SSN if Sole Owner: _____

Ever File Bankruptcy? Yes, Year _____ No

Business Hours: _____ Preferred Delivery Time: _____

Billing Information:

Business Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

A/P Contact Name: _____ Title: _____

Principal(s), Partner(s), Officer(s):

Name: _____ SSN: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Name: _____ SSN: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

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Credit Card Processing Form

CONFIDENTIAL INFORMATION

Customer Name: _____

Name on Credit Card: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Credit Card Type: Visa Mastercard Discover AmEx

Credit Card Number: _____

Expiration Date: _____ Card Verification Value (CVV): _____

One Time Charge: Yes No

Permanent CC Authorization: Yes No

*Please note that the credit card authorization form will be kept on file and charged per "Fulfillment Request"

One Time Charge Amount: \$_____

This charge is for goods ordered from Rise Fulfillment Network

X _____

Signature of Guarantor

Print Name

Date

Return the completed and signed form to the following:

fulfillment@risebayarea.net

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 _____

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PRINTED NAME OF PERSON SIGNING _____	TITLE _____
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ADDRESS OF PURCHASER _____

TELEPHONE NUMBER () _____	DATE _____
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