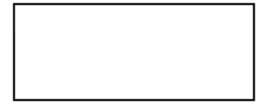


Registration Form
Northwest Wholesale Florists, Inc.
525 S. Front Street
Seattle, Washington 98108
(206) 622-5370 / (206) 621-8672 fax



BUSINESS NAME: _____

BUSINESS ADDRESS: _____

CITY: _____ STATE _____ ZIP: _____

PHONE: (____) _____ FAX: (____) _____

EMAIL ADDRESS: _____

BUSINESS UBI / REVENUE REGISTRATION#: _____

PLEASE CHECK ONLY ONE:

Store Front Flower Shop Home Based Church School Interior Designer
 Nursery/Greenhouse Market Seller Non-Floral Other _____

PLEASE SELECT ONLY ONE The buyer certifies that they are purchasing the items listed:

A _____ For resale in the regular course of business without intervening use in the regular course of Business, (Tax exempt) **Northwest Wholesale Florists Requires a copy of the State of Washington Nursery Resellers License for option A.**

B _____ For use as an ingredient or component part of a new article of tangible personal property to be produced for sale. (Tax exempt) **Reseller Permit Required**

C _____ Items purchased will not be for resale
(sales tax will be applied to purchases)

Please include a copy of your current business license, reseller permit (if applicable), and picture ID.

NORTHWEST WHOLESALE REQUIRES A CURRENT BUSINESS LICENSE AND RESALE CERTIFICATE ON FILE BEFORE A PURCHASE CAN BE MADE.

The buyer acknowledges that it is solely responsible for purchasing within the state laws pertaining to Washington Department of Revenue. The buyer acknowledges that misuse of the resale privilege claimed by use of this certificate subjects the buyer to a penalty of 50% of the tax due, in addition to the tax, interest and any other penalties imposed by law.

SIGNATURE/S: _____

PRINTED NAME/S: _____

ADDITIONAL AUTHORIZED PURCHASER/S: _____

DATE SIGNED: _____

EXPIRATION DATE: (4 YEARS FROM DATE SIGNED): _____