



NMEDIA SYSTEM INC.

5051 Stone Canyon Drive
Castro Valley CA 94552
Accounting@nmediapc.com

Instructions

1. Please complete the following **two pages** Account Setup Form.
2. Please attach a copy of your Resale Permit.
3. Please return your Account Application Form to NMEDIA SYSTEM either by mail or by email.

Reseller Account Setup

Legal Business Name (same as business license)	Dun and Bradstreet Number (D&B # if applicable)
DBA (Doing Business As)	Owner
Billing Address (No P.O. Boxes please)	President
City	CEO / CFO
State / Zip Code	Authorized Purchaser
Business Phone Number	E-mail Address
Business Fax Number	Business Website Address

This company is a

Sole Proprietorship Partnership LLC Corporation

Federal Tax I.D. Number: _____

Social Security Number: (Sole only) _____

Resale Information

FIRM NAME: _____

I HEREBY CERTIFY, that I hold a valid seller's permit # _____
_____ 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 nMedia System, Inc. will be resold by me in the form of tangible property; PROVIDED, however, that in the event any of 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 for the tax, measured by the purchase price of such property.

Description of property to be purchased: _____

Signed at: _____
(Location of the business)

Phone: _____

The applicant hereby authorizes the release of credit and banking information by the references listed in this application to Ma Laboratories, Inc.

Name (please print)

Signature

Title