

007 Systems Dealer / Resale Information

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____ Fax # _____

Name of Company Contact _____

Date _____ Title _____

Email _____

Resale Information

IF you wish to obtain tax free status with our company and you are shipping our products to a California address, you must fill out the following resale card. Please be aware this information will be verified.

I hereby certify that I hold a valid Seller's permit No _____

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 **007 Systems** will be resold by me in the form of tangible personal 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 the 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: **Security and Access Equipment for residences and businesses**

Print Name of Purchaser or Authorized Agent _____

Signature of Purchaser or Authorized Agent _____

Date _____ Title _____

Phone # _____ Fax # _____

E-Mail _____

Please fax this completed form to 888 833 4007