



A FURNITURE MFG CO.

NEW ACCOUNT INFORMATION

6857 SUVA ST • BELL GARDENS, CA 90201
PH (562) 927.8003 • info@bellafurniturehome.com
www.bellafurniturehome.com

Date: _____

Company name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

We operate _____ We have been established _____ years
(Type of Business)

Business type: Sole Proprietorship Partnership Corporation in State of _____
(If a Corporation, list names of officers and titles. If other entity, list names of partners or owners.)

Name	Address	City	Phone

RESALE CERTIFICATE

FIRM NAME _____

I HEREBY CERTIFY,
That I hold valid seller's permit No. _____
issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling Furniture that the
tangible personal property described herein which I shall purchase from:

Marbella Designs. DBA Bella Furniture

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 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: Furniture

Dated: _____ Signature _____

At _____ By and Title _____

Phone _____ Address _____

FOR OFFICE USE ONLY

Sales Representative	Terms	Account Code
	25% deposit, balance due at shipping	