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Email:- info@trimexwholesale.com

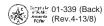
Application/Dealer Agreement

Company Name:					
Street Address:		Mailing Address:			
City:	State:	Country:	Zip Code:		
Telephone:		Fax:			
CEO/President:		Email:			
Controller/Chief Financial Offi	icer:				
Accounts Payable Contact:					
Owners Name:	Owners Phone:	Contact:			
Duns #	Tax ID #	Website Address:			
Please attach a copy of the following 1. *Owner's Driver's License 2. *Texas Limited Sales & Use Ta: 3. *Tobacco & Cigarette Permit 4. *Authorized Buyer's Driver's L					
Personal Guarantee Statement (Trim	ex Wholesale):				
I hereby guarantee to Trimex Wholes	sale LLC, dba Trimex Whol	lesale (hereafter referred to as Trimex Who	lesale)the prompt payment, when due,		
of every claim which now exists, or n	nay hereafter, arise in favor	of Trimex Wholesale.			
Against (Business Owner/Person res	ponsible of payment)				
This is a continuing guarantee and sh	nall remain in force until re	voked by notice in writing to Trimex Whol	esale.		
such revocation to be effective only a	s to claims of Trimex Whol	lesale which arise out of transactions entere	d into after its receipt and acknowledgment-		
-of such notice.					
In event that this guarantee is placed	in the hands of an attorney	for enforcement hereofthe undersigned pr	omises and agrees to pay the reasonable		
Attorney's fees to be fixed by the trial					
The undersigned personally guarante	es payment of all debt incu	rred to Trimex Wholesale LLC, dba Trimes	x Wholesale.		
Dealer and their employees have a du	ıty under law to be fully kno	owledgeable of, and comply with, all federa	l, state, and local laws, regulations and		
ordinances applicable to the sales and	d transfer of tobacco produ	ct.			
Dealer agrees not to export, directly of from Trimex Wholsale LLC.	or indirectly through an inte	ermediary or third party, products from the	United States without prior written consent-		
All information must be completed a	nd submitted with original	signatures.			
Applicant Signature					
Printed Name	me Date				
Personal Guarantee					
Name	Date				



Texas Sales and Use Tax Resale Certificate

Name of purchaser, firm or agency as shown on permit		Phone (Area code and r	number)			
Address (Street & number, P.O. Box or Route number)						
City, State, ZIP code						
Texas Sales and Use Tax Permit Number (must contain 11 digits)						
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico						
(Retailers based in	(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)					
I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:						
Seller:						
Street address:						
City, State, ZIP code:						
Description of items to be purchased on the attached order or invoice:						
,						
Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:						
The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.						
I understand that if I make any use of the items other than rete I must pay sales tax on the items at the time of use base period of time used.		-				
I understand that it is a criminal offense to give a resale cer are purchased for use rather than for the purpose of resale, may range from a Class C misdemeanor to a felony of the	lease or rental, and depending		-			
sign here Purchaser	Title		Date			



Texas Sales and Use Tax Exemption Certification

This certificate does not require a number to be valid.

Name of purchaser, firm or agency						
Address (Street & number, P.O. Box or Route number)		Phone (Area code and n	umber)			
City, State, ZIP code						
only, state, 211 code						
I, the purchaser named above, claim an exemption from payment of sales and use taxes (for the purchase of taxable items described below or on the attached order or invoice) from:						
Seller:						
Street address:	City, State, ZIP (code:				
Description of items to be purchased or on the attached or	der or invoice:					
Purchaser claims this exemption for the following reason:						
Lundaratand that Lwill ha liable for neumant of all state and	local calca or uso tayos which	may basama dua f	or failure to comply with			
I understand that I will be liable for payment of all state and the provisions of the Tax Code and/or all applicable law.	iocai sales of use taxes willch	may become due i	or randre to comply with			
I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase, will be used in a manner other than that expressed in this certificate, and depending on the amount of tax evaded, the offense may range						
from a Class C misdemeanor to a felony of the second degree.						
Purchaser	Title		Date			
sign here						
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NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

This certificate should be furnished to the supplier.

Do <u>not</u> send the completed certificate to the Comptroller of Public Accounts.