



TRADE APPLICATION FORM

This information helps us to better understand you and the services you provide, to determine whether a mutual relationship is viable and favourable.

We understand that some of this information is confidential, and assure you that we will handle all submitted data as such. No information will be shared or sold to any third parties.

COMPANY NAME:

CONTACT NAME:

DELIVERY ADDRESS:

TOWN / CITY:

COUNTY / STATE:

POSTCODE / ZIP CODE:

PHONE:

E-MAIL:

FAX:

WEBSITE:

VAT / GST / SALES TAX NO.:

YEARS IN BUSINESS:

PLEASE ANSWER ALL QUESTIONS WHICH ARE RELEVANT TO YOUR BUSINESS.

Bricks & Mortar

☐

Online Store

☐

(Please note: Ebay stores are not accepted)

Mail Order

☐

Other

☐

Please describe:

How many locations does your business have?

How many staff do you employ (including yourself)?

Do you sell at the manufacturer's / distributor's Recommended Retail Price?

If not, please explain your pricing policy:

Do you advertise?

Where and what media?

What frequency?

Do you teach workshops?

Do you exhibit at Retail Shows and Conventions?

How often and where?

Please supply contact details of two trade references (companies you currently do business with):

COMPANY NAME:	PHONE:
CONTACT NAME:	E-MAIL:

COMPANY NAME:	PHONE:
CONTACT NAME:	E-MAIL:

Please attach a copy of a current invoice from these companies.

Please also attach 2 or more of the following as proof of business: Yellow Pages / Recent Print Advert, UK / EU Copy of VAT / GST / Sales Tax Certificate

I have read and understand the Claritystamp Limited Trade Terms and Conditions, and if approved as a reseller, agree to abide by them.

SIGNED:

DATE:

POSITION:

Please return the completed form, with copies of the required documents, to:

CLARITYSTAMP LIMITED, UNIT A GAYWOOD FARM, HOLE LANE, EDENBRIDGE, KENT, UK TN8 6SL

Thank you for taking the time to fill out this form.