American Florist Supply, Inc., dba Bay State Farm Direct Flowers

One Progress Way Wilmington, MA 01887 978-658-2400 sales@baystateflowers.com

Customer Account Application and Agreement

Legal Business Name:						
Corporation	Sole	Proprietorship	P	artnership	Noi	n-Profit
Owner:				Own	ers Title:	
Address:				Date Es	tablished:	
				State of	Incorp:	
City:	State:	Zip Code:		Federal	Tax ID#:	
Phone:		Mobile	e Phone:			
Email:						
Home address if different from	above:					
Buying from which location?	Wilmington	MABe	dford NH	Cransto	n RI	East Patchogue NY
Payment is due at the t	ime of transaction	on. Personal cl	hecks are no	t accepted w	ithin 90 d	ays of application.
Preferred Payment Method:	Cash	Company Che	eck	_ Credit Card	_	Debit Card
	(P	lease read and	sign disclosu	re below.)		
By signing this customer ag	reement, the indiv	vidual executing	this application	on represents	and warrar	nts to Bay State that:
- The information provided in t	his application is a	accurate and con	nplete;			
- An accurately completed Res			•	se are include	d if require	d;
- All purchases from Bay State		•	•			
- Payment is due at the time of				rizes an except	tion;	
- Consent is given to Bay State		=	_	Non manadicial ta		
 All claims and/or credit reque must be provided within 24 h 			•	•		ad, photos detailing the issue
- All NSF checks will incur a fee		- ·		-		:e:
- All unpaid balances will incur	ria de la compansión de		•	•		•
- In the case of non-payment, a			•		-	
 Customer agrees to submit to jurisdiction of any state which 					usetts as w	ell as the personal
- There is clear understanding a	and unconditional	agreement with	out protest to	all of the term	ns detailed	above.
Applicant Signature:			A	pplicant Title	:	
Applicant Name (Print)				Date		

Please include a completed State Resale Tax Certificate and copy of your State Business License.

UNIFORM SALES & USE TAX RESALE CERTIFICATE — MULTIJURISDICTION

The below-listed states have indicated that this certificate is acceptable as a resale/exemption certificate for sales/use tax, subject to the instructions and notes on pages 2—6. The issuing Buyer and the recipient Seller have the responsibility to determine the proper use of this certificate under applicable laws in each state, as these may change from time to time. This form was revised as of October 14, 2022.

ss:					
tify that: e of Firm (Buyer): ess:			is engaged or is registered as a Wholesaler Retailer Manufacturer Seller Lessor (see notes on pages 2—4) Other (Specify)		
ses are for wheeless. Buyer is in	holesale, resale, or ingredients or components of a n the business of wholesaling, retailing, manufactu ness:	new product o rring, leasing (
l description	of tangible property or taxable services to be purch	hased from the	e Seller:		
State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser		
AK/ARSSTC1		MO ¹⁹			
AL ²		NE	 		
AR		NV ²⁰	+		
AZ ³		NJ	 		
CA ⁴		NM ^{5,21}	1		
CO ^{5,6}		NC ²²			
CT'		ND			
FL ⁸		OH ²³			
GA ⁹		OK ²⁴			
HI ^{5,10}		PA ²⁵			
ID ¹¹ IL ^{3,12}		RI ²⁶			
IA		SC SD ²⁷	<u> </u>		
KS ¹³		TN ²⁸	+		
KY ¹⁴		TX ²⁹	+		
ME ¹⁵		UT	 		
MD ¹⁶		VT ³⁰	1		
MI ¹⁷		WA ³¹	<u> </u>		
MN ¹⁸		WI ³²			
MIN					