

Application to become a customer of Food Ireland Wholesale

To:

Fax: 914 665 4083

Pages:

Phone: 914 665 4083

Date:

Re: Documentation

CC:

To allow us to set you up as a wholesale customer, please fill out and sign the two forms attached and also send us a copy of your Resale Certificate or Sales Tax Certificate or whichever form in your State that allows you to collect Sales tax for the State your business is located in.

Form checklist:

1. ☐ Food Ireland Account Application –
2. ☐ NY State Resale Certificate form ST 120
3. ☐ A copy of your business resale Certificate or Sale Tax Certificate or State Form that allows you to collect sale tax. Must show your business name, address and tax number.

Important notes:

A legible copy or picture of your State issued license or certificate of resale must be included.

The license or certificate number on the above document must be entered in the attached form ST-120

The business name and address on your certificate must match that entered on form ST-120

All forms must be signed, dated and name printed.

Food Ireland Wholesale

Application to become a customer.

Food Ireland LLC, 230 E 3rd St, Mount Vernon, NY, 10553
Please note that all fields are required. Application will be returned if items left blank.

Email application and other documents needed to accounts@foodireland.com

Describe your business:

Has your business a physical location open to the public ☐ Yes ☐ No

Legal Company Name:

DBA (if different)

Accounts Person: email:

Street Address :

City: State: Zip:

Business Phone: email:

Federal tax ID or Social Security number.

Date Business Established : No. Of employees

Website:

OWNER OF BUSINESS – Required

Owners Full Name:

Owners Home Street Address

Owners Home City

Owners Home State and ZIP

Owners Phone Email:

Other bits and pieces:

Once we validate the existence of your business, we will email you NY Reseller form ST-120 to complete

We need a picture or copy of your State issued Sales tax Certificate / License - must match what is entered on ST-120

All new accounts terms are COD -payment is due upon receipt of order.

If your account is approved, we will send you a Credit Card Auth Form to secure payment for any orders

IF THE CREDIT CUSTOMER IS A CORPORATION, LLC OR PARTNERSHIP, THEN THOSE SIGNING THIS APPLICATION, WHETHER SIGNING AS AN OFFICER OR NOT, PERSONALLY GUARANTEE PAYMENT FOR ALL ITEMS PURCHASED ON CREDIT BY THE CORPORATION.

Authorized signature:

Printed name:

Title:

Date:

The above signed company and persons are applying individually and jointly for a business account with Food Ireland and agrees to the terms and conditions of Food Ireland LLC as outlined on <https://www.foodirelandwholesale.com/terms.html>. These terms and conditions are updated regularly. By ordering from Food Ireland you agree to accept these terms and conditions. Acceptance of your application will allow us to sell to you or your business and does not imply that Food Ireland are extending you a line of credit.



Resale Certificate

Name of seller	Name of purchaser
Street address	Street address
City State ZIP code	City State ZIP code

Mark an **X** in the appropriate box: ☐ Single-use certificate ☐ Blanket certificate
Temporary vendors must issue a single-use certificate.

To the purchaser:

You may not use this certificate to purchase items or services that are not for resale. If you purchase tangible personal property or services for resale, but use or consume the tangible personal property or services yourself in New York State, you must report and pay the unpaid tax directly to New York State. Any misuse of this certificate will result in tax liabilities and substantial penalty and interest.

Purchaser information – please type or print

I am engaged in the business of _____ and principally sell _____
(Contractors may not use this certificate to purchase materials and supplies.)

Part 1 – To be completed by registered New York State sales tax vendors**I certify that I am:**

- ☐ a New York State vendor (including a hotel operator or a dues or admissions recipient), show vendor or entertainment vendor. My valid *Certificate of Authority* number is _____
- ☐ a New York State temporary vendor. My valid *Certificate of Authority* number is _____ and expires on _____

I am purchasing:

- ☐ **A.** Tangible personal property (other than motor fuel or diesel motor fuel)
- for resale in its present form or for resale as a physical component part of tangible personal property;
 - for use in performing taxable services where the property will become a physical component part of the property upon which the services will be performed, or the property will actually be transferred to the purchaser of the taxable service in conjunction with the performance of the service; or
- ☐ **B.** A service for resale, including the servicing of tangible personal property held for sale.

Part 2 – To be completed by non-New York State purchasers

I certify that I am not registered nor am I required to be registered as a New York State sales tax vendor. I am registered to collect sales tax or value added tax (VAT) in the following state/jurisdiction _____ and have been issued the following registration number _____ (If sales tax or VAT registration is not required and a registration number is not issued by your home jurisdiction, indicate the location of your business and write **not applicable** on the line requesting the registration number.)

I am purchasing:

- ☐ **C.** Tangible personal property (other than motor fuel or diesel motor fuel) for resale, and it is being delivered directly by the seller to my customer or to an unaffiliated fulfillment services provider in New York State.
- ☐ **D.** Tangible personal property for resale that will be resold from a business located outside New York State.

Certification: I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements and issue this exemption certificate with the knowledge that this document provides evidence that state and local sales or use taxes do not apply to a transaction or transactions for which I tendered this document and that willfully issuing this document with the intent to evade any such tax may constitute a felony or other crime under New York State Law, punishable by a substantial fine and a possible jail sentence. I understand that this document is required to be filed with, and delivered to, the vendor as agent for the Tax Department for the purposes of Tax Law section 1838 and is deemed a document required to be filed with the Tax Department for the purpose of prosecution of offenses. I also understand that the Tax Department is authorized to investigate the validity of tax exclusions or exemptions claimed and the accuracy of any information entered on this document.

Type or print name and title of owner, partner, or authorized person of purchaser	
Signature of owner, partner, or authorized person of purchaser	Date prepared

Substantial penalties will result from misuse of this certificate.