



credit application

Approximate Credit Line Required: \$ _____ Date: _____

Company Name: _____

Billing/Mailing Address: _____ Shipping Address: _____

County: _____
 Buyer's Name: _____ Account Payable Name: _____

Phone: _____ Phone: _____

Fax: _____ Fax: _____

Email: _____ Email: _____

List all officers or partners below:

Name	Title	Address	Social Security #

References: List at least one company bank reference and three trade references with **complete** address, phone, and email

Name	Address	Phone	Email (required)
Bank	Branch Location	Acct#/officer	Phone #

The above named company or individual certifies that the information contained herein is true and correct and that the above named company or individual agrees to pay all cost of collection, including reasonable attorney fees. All charges are due and payable, in full, at the office of Venture Circle International, LLC., Orlando, Orange County, Florida. I have read and understand the above paragraph and agree to all terms and conditions. I hereby authorize you to check my credit history in connection with a business transaction involving the above named firms.

Signature _____ Title _____



Venture Circle International, LLC
140 Maritime Drive
Sanford, FL 32771
PH:(407)677-6004 FX: (407) 657-5060
cs@venturecircellc.com

FOR CUSTOMERS OUTSIDE THE STATE OF FLORIDA THAT ARE

TAX EXEMPT

SALES TAX RULES & REGULATIONS

To our customers

It is necessary that we have a statement from our Customers stating that they are tax exempt* and that we have on file their certificate of resale for their state.

Please complete the BLANKET CERTIFICATE OF RESALE below, and return it to us promptly. If you do pay sales tax, please complete the form on the reverse side of this document. You may fax this to us at (407) 657-5060

BLANKET CERTIFICATE OF RESALE

PURCHASER:

Address: _____

This is to certify that all material, merchandise, or goods purchased by the undersigned from
VENTURE CIRCLE INTERNATIONAL, LLC.

AFTER: _____ is purchased for the following purpose(s):
(date)

- Resale of tangible personal property.
- To be incorporated as material or part of other tangible personal property to be produced for sale by manufacturing, assembly-processing or refining.
- To be exported for sale, use or consumption outside the continental limits of the United States.

CERTIFICATE NUMBER: _____

SIGNATURE: _____

***if you *are* NOT tax exempt, fill out the form on the reverse side of this document!**



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FOR OUR CUSTOMERS OUTSIDE THE STATE OF FLORIDA THAT ARE

NOT TAX EXEMPT

SALES TAX RULES & REGULATIONS

To our customers

In compliance with Sales and Use Tax Laws, it is necessary that we have a statement from our Customers stating that they are *not tax exempt** and are required to pay sales tax to the State in which they reside. They hereby acknowledge that any sales tax due will be paid to their State by them, under *Taxable Purchases*. This includes taxable purchases from out of state vendors.

NAME: _____

Address: _____

We are not tax exempt and hereby agree to remit the tax due for our State tax authority.

Name (please print) _____ Signature: _____

Title: _____ Date: _____

*if you are tax exempt fill out exemption on reverse side.