

The MintBox
1393 Progress Way
Suite 914
Eldersburg, MD 21784

Wholesale Sales Application

410-549-5683
Fax 866-288-2985
Form # 0108

BUSINESS INFORMATION

Fax this form along with your letterhead or business card, and your tax id certificate.

NAME OF BUSINESS		Email	IN BUSINESS SINCE
LEGAL NAME (IF DIFFERENT)		URL:	
ADDRESS		Contact	
CITY		BUSINESS ORGANIZATION:	
STATE	ZIP	PHONE	<input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIETORSHIP
PARENT COMPANY IN BUSINESS FOR			

Re-Sale Number# _____ State _____

We offer wholesale clients the ability to put your contact information on the ingredient label. Cost .05 per tin
 Yes I want my name on the ingredient label No I don't want it*

If yes, it should read _____
Limited to company name and contact number or url.

* If you choose not to have your company's name on the back label, it will have The Mintbox information on the label.

TRADE REFERENCES

CONTACT NAME	COMPANY AND ADDRESS	TELEPHONE	ACCOUNT SINCE

CONFIRMATION OF INFORMATION ACCURACY

I hereby certify that the information in this application is correct. The information included in this application is for review for sales of personalized mint tins or 6Pak Favors.

Signature

Title

Date

POLICY STATEMENT: All orders are paid before shipping. We normally hold a credit card on file and bill the card just prior to shipping. We can drop ship to your clients. Invoices will be emailed unless otherwise stated. We request that you sell our items at or above the retail price. Orders MUST be placed on The Mintbox order forms. We reserves the right to remove our items at anytime if we our items are compromised.

Disclaimer: Colors and styles will sometimes vary. We do our best to keep the items consistent, but different computer monitors or even printed materials, can change the colors. Item numbers, actual design names and clear instructions must be placed on our order forms. No returns for personalized tins unless the error was caused by The Mintbox.

CREDIT CARD

MC VISA AMEX DISCOVER

EXP. DATE. ____ / ____

Signature

I would rather call you with my credit card number.