

You may type information directly onto this form & print

Use this Cover Sheet to return your information to fax # (716) 616-1445
Please allow 2-3 business days for processing



To: Ingram Micro DC/POS New Accounts Department
Phone Number: 1-800-876-4629 Ext. 66682
Fax to team: (716) 616-1445

Company Name _____ Main Contact _____

Phone Number _____ Fax Number _____

Or by Mail: Ingram Micro DC/POS
New Accounts
1759 Wehrle Drive
Williamsville, NY 14221

About Ingram Micro Data Capture/POS Division

One Source. Complete Solutions.

Ingram Micro's Data Capture/POS Division is a specialized distribution and value-add service division offering Auto ID/Data Capture (AIDC and RFID) Point-of-Sale (POS) and mobile computing products. With ongoing product development and advancements in technology, we continue to create new applications for these products used in corporate offices, government, healthcare, hospitality, manufacturing, retail and warehousing.

We deliver a comprehensive product line from the industry's top manufacturers, including AML, DENSO, Hand Held Products, HP, IBM Retail Store Solutions, Metrologic, O'Neil, PSC, Samsung, Socket Communications, Symbol Technologies, WASP Barcode Technologies and Zebra. Customers receive expert support through regional sales and service offices, and our state-of-the-art product distribution centers across the United States and Canada.

Our customers also gain ready access to Ingram Micro's expansive linecard, featuring best-of-breed complementary IT products. From computers to wireless network to security, Ingram Micro customers find a truly complete solution to complement their AIDC, POS and mobile applications.

For more information, contact the Ingram Micro Data Capture/POS Division at (800) 876-4629.

RESELLER APPLICATION

Account Number
(For Office Use Only)

Section 1 – Business Information

Legal Business Name (As it appears on Business License)		Do you now or have you ever had an Ingram Account <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Account #		
Business Trade Name – DBA (Required if using a DBA Name)		Date Business Established	Fed Tax ID#	Business Website Address
Business Street Address (Must be actual location of business. No P.O. Boxes)		City	State	Zip
Billing Address (if different)		City	State	Zip
Business Phone Number (No Cell Phone)		Cell Phone #	Business Fax #	Business Toll Free #
Shipping Street Address		City	State	Zip
Authorized Purchaser		Email Address		
Authorized Purchaser		Email Address		
This Company is (check one)	<input type="checkbox"/> Public, Stock Symbol If subsidiary of Public Co. Parent Co. Name: <input type="checkbox"/> Private D & B# (If Known)			
Terms Requested <i>*Please choose your preferred method of payment. Regardless of payment terms selected, application processing will not be delayed.</i>	Credit Limit Amount Requested \$ <input type="checkbox"/> Net Terms (Will require Ingram Micro review and approval.) <input type="checkbox"/> EFT/ Direct Debit (Check here if you would like for us to send you information on paying your net terms account by direct debit) <input type="checkbox"/> Credit Card (Discover, Mastercard & Visa only) or Prepay Wire Transfer			

Public Companies – Skip to Section 4

Public Companies – Skip to Section 4					
If Private, the company is (check one)	<input type="checkbox"/> C-Corp, State of Incorporation	<input type="checkbox"/> S-Corp, State of Incorporation	<input type="checkbox"/> LLC	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership
Is there a Parent Company	<input type="checkbox"/> Yes, Name of Parent Company <input type="checkbox"/> No				
Is there a Subsidiary	<input type="checkbox"/> Yes, Name of Subsidiaries (or attach list) <input type="checkbox"/> No				
<small>Customer Agrees to Notify Ingram Micro of any changes of ownership of it's business within ten (10) days, as set for the herein by certified mail to the following address: Ingram Micro Inc., 1759 Wehrle Drive, Williamsville, NY 14221-7887</small>					
(List all owners with 25% or greater ownership in business, in order by greatest ownership percentage)					
Owner 1 Name	Percentage of Ownership		%		
Owner 2 Name	Percentage of Ownership		%		
Owner 3 Name	Percentage of Ownership		%		
Owner 4 Name	Percentage of Ownership		%		



Section 2 – Additional Owner Information

The following additional owner information is required, if either of the following circumstances is present:

1. Company is a Sole Proprietorship or Partnership **or** 2. Company is requesting net terms and would like Ingram Micro to consider the personal credit of the owner (s) in their evaluation.

The undersigned individual (s), who is/are the principal(s) of the credit applicant or a sole proprietor of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by above named business credit grantor in the credit evaluation process.

Owner 1 Signature	Social Security Number		
Home Street Address	City	State	Zip
Owner 2 Signature	Social Security Number		
Home Street Address	City	State	Zip

If credit card or pre-pay was requested you may skip to Section 4

Section 3 – Credit Information for Net Terms Request**Section 3A, 3B & 3C are required for ALL Net Terms Requests**

3A Financial statements may be required to extend trade credit. You will be contacted if they are needed, or you may include with this application when returned. Please include a minimum of the prior two year's income statement & balance sheet, and interim financials if available.

Person to Contact for Information or Financial Questions:

Name	Title
Phone	Email
<input type="checkbox"/> check here if Financial statements are attached to this application	

3B – Do you currently finance any of your computer purchases through flooring or leasing programs?

<input type="checkbox"/> Yes (Complete information below)	<input type="checkbox"/> NO
Finance Company Name	Finance Company Name
Dealer #	Dealer #
Finance Company Address	Finance Company Address
Finance Company Telephone Number	Finance Company Telephone Number
Check if you would like information on any of the following alternative financing programs: <input type="checkbox"/> Flooring <input type="checkbox"/> Leasing <input type="checkbox"/> End User Financing through Ingram Micro	

3C – Trade & Bank References

Check here if you have attached a separate trade and bank reference sheet rather than completing below

Trade References (Preferably in the Computer Technology Industry)

1. Company Name	2. Company Name
Company Address	Company Address
Company Phone #	Company Phone #
Company Fax #	Company Fax #
Account Number	Account Number
Contact Name	Contact Name

3C-Bank Reference		
Bank Name	Account Officer Name (If known)	
Bank Address	Checking Account #	
Bank Telephone #	Savings Account #	
Bank Fax # (if Known)		
Do you have a line of Credit with your Bank?	<input type="checkbox"/> Yes <input type="checkbox"/> NO	Line of Credit Account #

Section 4 – Export Information

Will any of your purchases be for Export? <input type="checkbox"/> Yes <input type="checkbox"/> NO
If Yes, Please complete and submit the exporter Questionnaire with this application. Exporters must also read the informed Exporter Information. Both of these documents can be found at http://www.ingrammicro.com/visitor/potentialreseller/resellapexport.pdf In the event you intend to purchase product to be exported by Ingram to your customer overseas, a separate International Fulfillment Agreement (IFA) will be required. Contact Ingram Micro Sales for more information once your account is established.



IN ORDER NOT TO DELAY YOUR ORDERING ABILITY, PLEASE MAKE SURE YOU HAVE PROVIDED ALL INFORMATION REQUESTED. PLEASE NOTE: ACCOUNTS THAT HAVE NO SALES ACTIVITY WITHIN A 12 MONTH PERIOD WILL BE DELETED FROM OUR SYSTEM.

This application and agreement is submitted by applicant to Ingram Micro Inc. (Ingram Micro), a Delaware corporation, to obtain trade credit. Ingram Micro reserves the right to decline credit to any applicant. In the event credit is extended to applicant, Ingram Micro reserves the right at any time thereafter to change or revoke such credit for any reason, including but not limited to, credit policy changes by Ingram, applicant's financial condition, applicant's payment record, applicant's failure to meet sales volume requirements established by Ingram Micro, and/or applicant's utilization of such credit limit. All product sales by Ingram Micro to applicant will be subject to Ingram Micro's standard Sales Terms and Conditions as published on Ingram Micro's website at www.ingrammicro.com at the time of sale. Any variance from those terms and conditions will be effective only if agreed to in writing by Ingram Micro prior to the time of sale. Customer acknowledges and agrees that Ingram may send customer marketing and business communications from time to time via various means, including e-mail.

Customer agrees to make payment in full to Ingram Micro for all amounts due according to Ingram Micro invoice(s). Customer also agrees to pay Ingram Micro, as interest, an amount equal to 1 1/2% per month, or the maximum provided by law (whichever is less) for invoice amounts that are past due. Should customer default in any such payment(s), Ingram Micro shall have the right, without notice to customer, to declare all invoice amounts due and payable. In the event Ingram Micro should commence any action or actions, or otherwise seek to enforce this agreement against customer, customer agrees to pay reasonable attorney(s) fees, court costs, and other expenses incurred by Ingram Micro, whether or not suit is filed. This agreement is strictly confidential and is not transferable or assignable without prior written consent of Ingram Micro. Customer agrees that any change in liability for any debts incurred to Ingram Micro due to a change in customer's form of business, shall not be effective as to Ingram Micro, until Ingram Micro receives actual notice of the change by certified mail. This application and agreement shall be construed, interpreted, and enforced under and in accordance with the internal laws of the State of California, excluding its conflicts or choice of law rule or principles which might refer to the law of another jurisdiction. Venue shall be in Orange County, California, or Erie County, New York, as determined by Ingram Micro.

Signature Section

Applicant hereby agrees to the foregoing and authorizes the release of credit and banking information to Ingram Micro by the references listed on this application. The following must be completed in order to have an account

Owner/Partner/Corporate Officer Name- Please Print (Required)

Title (Required)



SIGN HERE

Owner/Partner/Corporate Office Name – Signature (Required)

As of this _____ day of _____, 20__



Some programs require vendor authorization to resell products. Which of the following manufacturers to you have authorized reseller agreements with, if any? (Please check all that apply and write in your authorization number).

- 3 Com NBX # _____
- Apple # _____
- Cisco Premier # _____
- Citrix # _____
- Datamax # _____
- HP # _____
- IBM # _____
- Juniper # _____
- Lenovo # _____
- Microsoft Academic # _____
- Palm # _____
- Symbol # _____
- Wyse # _____
- Zebra # _____
- Other (specify) # _____
- None

Please select the statement that best describes your involvement with the following DATA CAPTURE/POS solutions

	Resell and install solution at end-user's location	Resell solution to end-user and partner with another organization who installs solution	Resell solution to end-user / end-user handles installation	Do not sell this solution
Wireless Field Deployment Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bar Code Scanning Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supply Chain / Logistics Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asset Management Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inventory Control Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sales Force Automation Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Field Service Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Direct Store Delivery Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security – ID Badges/Access Control Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communications Solutions in Healthcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescription/Specimen Labeling Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile Data Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality Management Solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Which of the following industries is your company actively targeting with DATA CAPTURE/POS solutions?

- Agriculture
- Communications
- Construction
- Discrete manufacturing (manufacturing of distinct items, such as: automobiles, planes, and bicycles)
- Education
- Financial services
- Government (local, regional, national)
- Healthcare
- Hospitality
- Military
- Process manufacturing (oil, gas, paint)
- Professional services (legal, accounting, consulting)
- Retail
- Transportation
- Utilities
- Warehouse
- Wholesale trade
- Other (please specify): _____
- None of these

IMPORTANT TAX INFORMATION – Resale Tax

Ingram Micro is a distributor/wholesaler.

To establish and maintain your account, we require that you provide us with a Resale Certificate valid in the state where you are located, as well as any other state in which you are registered, and that you update your certificate(s) on a periodic basis in accordance with state laws and/or Ingram Micro policy. Our Resale Tax Department will notify you by mail when an updated certificate is required. Failure to provide an updated certificate may result in delayed shipments, rejection of your orders, and/or the closure of your account. Orders that are drop-shipped may be subject to sales tax if you have not provided Ingram Micro a Resale Tax Certificate for the ship-to location. The Resale Certificate must include:

1. Legal business name
2. Business trade name(s); DBA
3. Business address and phone number
4. Type of business as registered with your state
5. General description of business
6. State sales registration number of each state in which you are licensed for resale
7. Signature of owner or officer signing application
8. Name and title of person signing certificate
9. Date certificate is signed

Ingram Micro has special sales tax requirements for shipments to the following states:

California Sales tax will be applied to all shipments to the State of California unless a valid California Resale Certificate is provided. If you have any questions, please contact your Sales Representative or the Resale Tax Department prior to requesting Ingram Micro ship to California on your behalf.

Massachusetts Sales tax will be applied to all shipments to the State of Massachusetts unless a valid Massachusetts Resale Certificate is provided. If you have any questions, please contact your Sales Representative or the Resale Tax Department prior to requesting Ingram Micro ship to Massachusetts on your behalf.

Tennessee Sales tax will be applied to all shipments to the State of Tennessee unless a valid Tennessee Resale Certificate is provided. If you have any questions, please contact your Sales Representative or the Resale Tax Department prior to requesting Ingram Micro ship to Tennessee on your behalf.

IL/NY/PA If you will be requesting us to ship product into these states, and you are not registered in these states, additional documentation is required. You will need to provide us with the state specific resale/exemption certificate, completing all required information on the certificate, including a brief explanation as to why you are not registered. State specific forms can be obtained from our New Accounts Department.

If a state in which you are registered for resale does not accept the attached Uniform Sales & Use Tax Certificate – Multijurisdiction, please call our New Accounts Department at (800) 876-4629, ext. 66682 to obtain the appropriate form.

Washington Gross Receipts Tax Fee

Washington All shipments into the State of Washington will be subject to a fee of .00484 calculated on the total sale price of product shipped into Washington. The fee is billed separately, on a monthly invoice.



UNIFORM SALES & USE TAX CERTIFICATE – MULTI JURISDICTION

The below-listed states have indicated that this form of certificate is acceptable, subject to the following notes. The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: Ingram Micro Data Capture/POS Division
 Address: 1759 Wehrle Drive
 Williamsville, NY 14221

<p>Account Number (For Office Use Only)</p>

I certify that:

Name of Firm: _____ DBA Name: _____
 (Required Name of Firm) (Required Name of Firm)

Is engaged as a registered: **(Required -- Please check all that apply)**

- Lessor (See Notes) Manufacturer Retailer
 Seller (California) Wholesaler Other _____

Street Address: _____ City, State, & Zip: _____
 (Required Street Address) (Required City, State & Zip)

and is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients, or components of a new product or service to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of business: _____
 (Required Description of business)

General description of tangible property or taxable services to be purchased from the seller: **Computer hardware, software, and/or related items**

You are required to complete the following for all state(s) in which you are registered unless it is not listed or a state specific form is required as outlined below.

[Click here for instructions 1-21 regarding Uniform Sales Use Tax Certificate](#)

Alaska, Delaware, Montana, New Hampshire, & Oregon do not require a resale certificate, but we do require this form be completed, with the exception of the tax number, to serve as documentation that product purchased from Ingram Micro is for resale: .

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
Alabama 2	_____	Louisiana	state specific form required*	Ohio 26	_____
Arizona 22	_____	Maine 9	_____	Oklahoma 16	_____
Arkansas	_____	Maryland 10	_____	Pennsylvania	State specific form required*
California 3	_____	Massachusetts	state specific form required*	Rhode Island 17	_____
Colorado 1	_____	Michigan 11	_____	South Carolina	_____
Connecticut 4	_____	Minnesota 12	_____	South Dakota 18	_____
Dist. of Columbia 5	_____	Mississippi	_____	Tennessee	_____
Florida 23	state specific form required*	Missouri 13	_____	Texas 19	_____
Georgia 6	_____	Nebraska 14	_____	Utah	_____
Hawaii 1, 7	_____	Nevada	_____	Vermont	_____
Idaho	_____	New Jersey	_____	Virginia	State specific form required*
Illinois 1, 8	_____	New Mexico 1, 15	State specific form required*	Washington 20	_____
Indiana	State specific form required*	New York	State specific form required*	West Virginia	state specific form required*
Iowa	_____	North Carolina 25	_____	Wisconsin 21	_____
Kansas	_____	North Dakota	_____	Wyoming	State specific form required*
Kentucky 24	_____				

I further certify that if any property or service so purchased tax free is used or consumed by the firm as to make it subject to a Sales or Use Tax, we will pay the tax due directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a part of each order, which we may hereafter give to you, unless otherwise specified, and shall be valid until cancelled by us in writing or revoked by the city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature (Required): _____ (Owner, partner, or corporate officer)

Title: (Required) _____ Date: _____ (Required)

*State specific forms may be downloaded from our website www.ingrammicro.com with the following exceptions: for a Florida DR-13 form, please contact the Florida Department of Revenue at 941-361-6001; for a New Mexico form, please contact the New Mexico Taxation and Revenue Department at 505-841-6200. If you have any questions, contact the New Accounts Department at 1-800-876-4629, ext. 66682.