



NEW WEB CUSTOMER REGISTRATION

Company Name	
Street Address	
Unit / Suite #	
City	
State	
ZIP	
Tel #	
Email	
Website	
EIN / Tax ID	
Buyer's Name	
Email	
Cell #	

TO COMPLETE YOUR REGISTRATION, FILL OUT THIS FORM AND EMAIL IT ALONG WITH A COPY OF YOUR BUSINESS LICENSE AND A COMPLETED NEVADA RESALE CERTIFICATE TO:

registration@vypevapor.com

5275 S Arville St, Ste 308, Las Vegas, NV 89118
Tel # (702) 463 3090 Email: info@vypevapor.com



Nevada Resale Certificate

I hereby certify that I hold a valid seller's permit number _____ issued pursuant to chapters 372, 374 and 377 of the Nevada Revised Statutes; that I am engaged in the business of selling _____ and that the personal tangible property described in the second paragraph of this certificate, which I purchase from **VypeVapor LLC**, will be resold by me in the form of tangible personal property. I further certify that, in the event that any of the property is used for any purpose other than retention, demonstration or display while I am holding it for sale in the regular course of business, it is understood that I am required by chapters 372, 374 and 377 of the Nevada Revised Statutes to report it and pay the tax measured by the purchase price of the property.

Description of the property to be purchased:

E-Cigarette Liquids for use in E-Cigarettes

_____ Date

_____ Purchaser Address (Street # and Name)

_____ Purchaser Name (Print)

_____ Purchaser Address (City, State, Zip Code)

_____ Purchaser Signature