

# Adwar Casting Co., Ltd.

120 South Long Beach Road, Rockville Centre, NY 11570

• PHONE (516) 678-7755 \* FAX (516) 678-7756 \* ORDERS ONLY (800) 255-7755

## Fax Transmittal

Re: Credit Card Account

In order to apply for an account with Adwar Casting using your Credit Card, the attached forms must be completed and returned:

- **Credit Card Agreement**
- **Resale certificate/ USA Patriot AML Compliance**

Please fax these completed forms to us at **516-678-7756**. If you have any questions please call the main office at 516-678-7755.

We look forward to doing business with you.

Thank you  
Adwar Casting  
Credit Department





120 S. LONG BEACH ROAD, ROCKVILLE CENTRE, NY 11570 PHONE: 516.678.7755 FAX:516.678.7756  
ONLINE: WWW.ADWAR.COM EMAIL: SALES@ADWAR.COM

**Resale Certificate**

All purchases from Adwar Casting Co. Ltd. are for resale only. Please insert your sales tax permit number with your signature and address on this resale certificate. We will not process any order without a complete and correct resale certificate. If your state requires a specific form or document, please attach same with proper signature.

Company Name \_\_\_\_\_

I hereby certify , that I hold a valid seller’s permit number \_\_\_\_\_ Issued pursuant to the sales an use tax law that I engaged in the business of selling jewelry and that the tangible personal property described herein which I shall purchase will be resold by me in the form of tangible personal property, provided, however that in the event any such purchase is used for any other purpose other than retention, demonstration or display while holding it for sale in the regular course of business, it is understood that I am required by the sales and use tax law to report and pay for the tax, measured by the purchase price of such property.

Company \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

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**USA Patriot AML Compliance Confirmation**

Company Name \_\_\_\_\_

Owners Name \_\_\_\_\_ Compliance Officer \_\_\_\_\_

**Select the condition that best describes your company’s status:**

- We have a fully compliant anti-money laundering program addressing each of the required elements under the law. Our program satisfies all of our anti-money laundering obligations and is periodically reviewed to insure it is operating as designed.
- We are not a dealer in “covered goods” which includes precious metals, stones or jewels as defined by the USA Patriot Act and as such do not need to implement an anti-money laundering program.

**I confirm that all above information is true and correct.**

\_\_\_\_\_  
*Signature* *Date*