



Bead Bee
 1218 Catherine Street
 Orlando, FL 32801
 Tel: 407. 237. 0246
 Fax: 1. 888. 481. 6809
 Email: mail@beadbee.com
 Website: www.beadbee.com

WHOLESALE ACCOUNT APPLICATION

Company Name: _____

Contact Person/ Authorized Buyer: _____

Phone Number _____

Fax _____

Email _____

Website _____

Billing Address

Name _____

Company _____

Street _____

P.O. Box _____

City/ State _____

Zip _____

Shipping Address

same as billing address

Name _____

Company _____

Street _____

P.O. Box _____

City/ State _____

Zip _____

Years In Business: _____ Years _____ Months

Type of Business (check all that apply):

Retail Store Online Retailer Craft Show/ Event Vendor Other _____

Products of Interest (check all that apply):

Beads & Supplies Finished Jewelry including officially licensed products Other _____

NOTES: _____

Return this form with a copy of your resale license/ certificate to:

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