

Healthco Bulk New Customer Inquiry

Company Name _____ Contact _____

Business address _____

State _____ Zip Code _____ Phone _____

Ship to address (if different from above) _____

State _____ Zip Code _____ e-mail _____

As a manufacturer, we do not charge sales tax and are required to have a valid resale for each location we ship to.

Do you have a valid Resale for the state we are shipping to? Yes No

What is the resale number _____ Expiration Date _____

How is your business registered? (Manufacturer, Retail, etc.) _____

The minimum for bulk products is \$1000 per SKU (pricing F.O.B. Roselle, IL)

Will you require a Specification Sheet _____ Certificate of Analysis _____

What other documentation will you require (additional documentation requires a minimum purchase per SKU of \$5000)?

Check all that apply

Vendor Audit _____ Allergy Statement _____ Non-GMO _____ SDS _____

Kosher _____ Organic _____ Gluten Free _____ GMP Certification _____ C.O.O. _____

UL Certification _____ Flow Chart _____ HAACP _____

Additional documentation needed: _____

What items are you interested in receiving a quote? Please provide the quantity.

Item Description	Form	Quantity	Annual Volume
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What is the timeline that you need the product _____