

# The CandyLand Store.com Wholesale Application

## **Opening an Account**

To open an account with The Candyland Store, LLC, you must submit the signed and completed Wholesale Application as well as the following by fax 1-973-415-8393 or mail it to:  
The CandyLand Store, LLC  
50 Luisser Street  
Clifton, NJ 07012

## **Opening Order**

Your opening order must be \$200.00 net. All orders must be paid for using a credit card.

## **Re-Orders**

All re-orders must be a minimum of \$150.00 net.

## **Annual Purchase Requirements**

The CandyLand Store retailers must meet the annual (rolling 12 months) minimum purchase requirement of \$1,000.00.

## **Account Status & Review**

The status of your account will be reviewed annually. In an effort to keep records accurate you may be asked periodically to provide updated information regarding the status of your business. Accounts showing no activity for more than six (6) months will be deactivated.

## **Authorized Buyers**

Only authorized buyers are allowed to place orders. Accounts are limited to two (2) authorized buyers. Only the business owner (the name appearing on the account application) may change, add or remove an authorized buyer. All authorized buyers must be employees of the business/account.

## **Order Confirmation**

You will receive an order confirmation email when you place an order.

**Fax Orders:** Fax orders may be transmitted to 1-973-470-0519, use the approved The CandyLand Store order form available for download on The CandyLand Store website.

## **Order Modification**

An order cannot be modified or canceled once it has been submitted to the web site or entered into the computer system by an order entry agent.

RETAILER ACCOUNT APPLICATION

Business Name:

\_\_\_\_\_

Primary Contact Name:

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

Submission Date: \_\_\_\_\_

Provide a copy of a current State Business Certificate.

Provide a copy of your State Sales Tax Certificate.

Photocopy of your business license or your FEIN number.

Domain name information if you are planning on selling the products online.

Complete the credit card information.

**FOR OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_ RECEIVED BY: MAIL FAX

COMPLETE: YES NO

**APPLICATION PROCESSING**

DATE SUBMITTED: \_\_\_\_\_

PROCESSED BY: \_\_\_\_\_

ACCOUNT APPROVED: YES NO

**Billing Information:**  
**(Must match the billing address on your credit card)**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: (     ) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

**Shipping Information:**

Full Name: \_\_\_\_\_

Company: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

Shipping Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: (     ) \_\_\_\_\_ - \_\_\_\_\_

**Credit Card Information:**

Name as it appears on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CVV Code - \_\_\_\_\_

*If you're using a Visa or MasterCard it is the 3 digit code from back of the card– If you are using an American Express card then it is a 4 digit code from front of the card.*

You as the authorized cardholder do hereby authorize The CandyLand Store, LLC to charge your credit card for the items and shipping cost associated with your order.

Card Holder Signature:

\_\_\_\_\_ Date \_\_\_\_\_

**Fax your order to:**  
**973-470-0519**