BIG DISTRO INC
TOBACCO WHOLESALE AND DISTRIBUTION

Wholesale Customer Application

LICENSED RETAILERS ONLY · ALL APPLICANTS MUST BE 21+

4191-300 Fayetteville Rd, Raleigh, NC 27603 · (833) 211-2113 · contact@bigdistroinc.com
www.bigdistroinc.com

Thank you for your interest in partnering with **Big Distro Inc**, a licensed B2B distributor of premium cigars, tobacco products and smoking accessories. Complete every section, sign on page 2, and submit this form with your documents through **bigdistroinc.com/join-us** or by email to **contact@bigdistroinc.com**. Our team reviews applications and responds within two business days. Fields marked * are required.

1 BUSINESS INFORMATION

LEGAL BUSINESS NAME *

DBA / STORE NAME

BUSINESS TYPE *

☐ Convenience store ☐ Smoke / tobacco shop ☐ Cigar shop / lounge ☐ Hookah lounge
☐ Grocery / market ☐ Gas station ☐ Distributor / wholesaler ☐ Other

ENTITY TYPE

☐ Corporation ☐ LLC ☐ Partnership ☐ Sole proprietor

FEDERAL EIN * | STATE SALES TAX / RESALE ID * | YEARS IN BUSINESS | NUMBER OF LOCATIONS

TOBACCO LICENSE / PERMIT # (IF REQUIRED BY YOUR STATE) | ISSUING STATE | EXPIRATION DATE

BUSINESS PHONE * | BUSINESS EMAIL * | WEBSITE

2 BUSINESS ADDRESS

STREET ADDRESS * | SUITE / UNIT

CITY * | STATE * | ZIP CODE *

3 SHIPPING ADDRESS

☐ Same as business address

SHIP-TO NAME / ATTENTION | STREET ADDRESS

CITY | STATE | ZIP CODE | RECEIVING HOURS

Tobacco products ship only to a licensed business location in North Carolina, South Carolina, Virginia or Tennessee. Accessories ship to all 50 states.

4 CONTACTS

OWNER / PRINCIPAL NAME * | TITLE | MOBILE PHONE * | EMAIL *

PURCHASING CONTACT | TITLE | PHONE | EMAIL

ACCOUNTS PAYABLE CONTACT | INVOICE EMAIL | PHONE

HOW WOULD YOU LIKE TO HEAR FROM US?

☐ Email ☐ Phone call ☐ Text / WhatsApp (order updates & offers)

5 PAYMENT PREFERENCE

PREFERRED PAYMENT METHOD *

- ☐ ACH
- ☐ Wire transfer
- ☐ Zelle
- ☐ Check
- ☐ Cash on delivery
- ☐ Credit / debit card

For your security, please do not write card numbers on this application. If you plan to pay by card, complete our separate **Credit / Debit Card Authorization Form (BD-110)**. Credit terms are available only by separate written agreement.

BANK NAME (FOR ACH / WIRE)	ESTIMATED MONTHLY PURCHASES ($)	REQUESTED CREDIT TERMS (IF ANY)

6 TOBACCO TAX STATUS

Big Distro collects and remits state tobacco products tax on taxable products shipped into NC, SC, VA and TN. Only customers that hold their own tobacco **distributor / wholesaler** license may report the tax themselves.

☐ We are a licensed tobacco distributor / wholesaler and will report and pay the tax ourselves (proof required)

DISTRIBUTOR / WHOLESALER LICENSE #	ISSUING STATE	EXPIRATION DATE

7 REQUIRED DOCUMENTS (ATTACH COPIES)

- ☐ Resale / exemption certificate (NC Form E-595E or your state's equivalent) *
- ☐ State or local tobacco retail license / permit (where required)
- ☐ IRS EIN confirmation letter (CP 575 or 147C) *
- ☐ Owner's government-issued photo ID *
- ☐ Tobacco distributor license (only if claiming tax responsibility in Section 6)

8 CERTIFICATION & AGREEMENT

By signing, I certify on behalf of the business named above that: (1) I am at least 21 years of age and authorized to sign for the business; (2) the business holds all licenses and permits required to sell the products it purchases and buys them for resale only; (3) the business will comply with all federal, state and local tobacco laws, including the federal minimum sales age of 21 and photo-ID checks for buyers who appear under 30; (4) the information in this application is true and complete, and I will notify Big Distro of any change or of any license expiring, being suspended or revoked; (5) Big Distro may verify this information and these licenses with issuing agencies; and (6) the business agrees to the Big Distro **Terms & Conditions** (bigdistroinc.com/terms) and acknowledges the **Privacy Policy** (bigdistroinc.com/privacy), which may be updated from time to time.

AUTHORIZED SIGNATURE (TYPE FULL NAME OR SIGN) *	DATE *

PRINTED NAME *	TITLE *

FOR BIG DISTRO OFFICE USE ONLY

ACCOUNT #	SALES REP	PRICE TIER	APPROVED BY	DATE APPROVED

- ☐ Licenses verified
- ☐ Resale certificate on file
- ☐ Portal access granted
- ☐ Card form on file