

WHAT WE NEED ON FILE FORM

*For the Treatment
of Aging,
Acne,
Rosacea,
Environmentally
Damaged
and other skin
conditions,
we blend science
with nature
to create
Visual Changes®.*

Dear Client,

To protect our industry and to better serve your needs, please forward the following information to us so we can process your orders:

INSURANCE: To protect our industry and maintain professional standards, all skin care professionals using our Designer Peels® must carry professional malpractice and liability insurance. Therefore, **BEFORE** we can ship you any Designer Peels®, please provide, for our files, a copy of your certificate of liability insurance. If you do not have insurance, you can contact the Marine Agency Corporation 1-800-763-4775 or you can source out your own insurance carrier.

SKIN CARE LICENSE: To protect our wholesale prices we only sell to licensed professionals. Therefore, we will need a copy of your state license for our files **BEFORE** we can ship you any products.

SELLER'S PERMIT: To protect our wholesale prices, if your business is located in the State of California, we need a copy of your Seller's Permit on file **BEFORE** we can ship you any products. You can obtain a Seller's Permit from the State of California Board of Equalization by registering in person at one of their field offices, or by mail. You can call their Information Center at (800) 400-7115 and request they mail you a Seller's Permit application or you can download one at the following URL: <http://www.boe.ca.gov/pdf/boe400spa.pdf>.

DEA #: Some of our products are prescription drugs or are formulated specifically for medical use. These items will only be sold to medical accounts that can provide a DEA Certificate. If you want to order any of these products, please provide a copy of your DEA Certificate for our files.

CONSENT FORM: We need a Professional Consent Form signed by you on file **BEFORE** we will sell you any Designer Peels®. If you do not have a copy of our Professional Consent Form, please ask and we would be happy to email or fax it to you.

Thank you for your help.

RESALE TAX CARD FOR CALIFORNIA ONLY

All accounts in California must complete and send this Resale Tax Card with their initial order. The law requires that we have a completed Resale Tax Card on file or charge the account for sales tax.

Business Name _____ Date _____

Street Address _____ Phone () _____

City _____ State _____ Zip _____ Contact _____

Business State License Number: _____

I hereby certify that I hold valid seller's permit # _____ issued pursuant to the Sales and Use Tax Law for the purpose of resale. Tangible personal property purchased from Visual Changes Skin Care International Inc.® will be resold in the form of tangible personal property. In the event that any of such property is used for any 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.

Print Name _____ Title of Position _____

Signature _____

Address: 4676 W. Jacquelyn Ave., Fresno, CA 93722

Web: www.visualchanges.com **Email:** customerservice@visualchanges.com

Phone: 559-275-9901 **Toll free:** 800-400-8901 **Fax:** 559-275-9902