

GALLERIA MARKET/ HK MARKET

**NEW VENDOR APPLICATION FORM**

◆ **GALLERIA MARKET/ HK MARKET ACCOUNTING DEPARTMENT**

5801 S. Malt Ave. Commerce, CA 90040

Office] 323-480-8500

FAX] 323-480-8501

email] accounting@galleriamarket.com , christinekim@galleriamarket.com

◆ **LOCATION (Your billing and shipping address will be varied)**

GALLERIA MARKET, LP

3250 W. Olympic Blvd. #100 Los Angeles, CA 90006

Tel] 323-733-3800

Fax] 323-733-5900

GALLERIA MARKET/ NORTHRIDGE, LP

10201 Reseda Blvd. Northridge, CA 91324

Tel] 818-772-5755

Fax] 818-772-5655

GALLERIA MARKET/VERMONT, LP

440 S. Vermont Ave. #100 Los Angeles, CA 90020

Tel] 213-427-6266

Fax] 213-427-4300

HK LA, LP

124 N. Western Ave. Los Angeles, CA 90004

Tel] 323-469-8934

Fax] 323-469-0674

HK GLENDALE, LLC

831 N. Pacific Ave. Glendale, CA 91203

Tel] 818-247-4949

Fax] 818-547-5445

GALLERIA MARKET, LP

(DBA HK GALLERIA WHOLESale)

5801 S. Malt Ave. Commerce, CA 90040

Tel] 323-888-8858

Fax] 323-480-8502

◆ **PLEASE SUBMIT FOLLOWING INFORMATION**

- Certificate of Liability Insurance (Please refer to the sample)
- Cancelled Invoice (1 copy)
- Seller's Permit Copy
- Fictitious Business Name Statement (Business Name has to be same with the one on the invoice)

◆ **NEW VENDOR INFORMATION**

※ [PACA No. : Produce Suppliers Only] ※

COMPANY'S LEGAL NAME		DBA
ADDRESS		
PHONE	FAX	E-MAIL
FEDERAL TAX ID NUMBER		SELLER'S PERMIT NUMBER
PACA LIC. NUMBER		
CONTACT PERSON'S NAME		CELLULAR

I, (Printed Name of Owner) , hereby affirm that the information of this form is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date