

CUSTOMER APPLICATION

Thank you for your interest in opening an Account with Steel Works Stainless. Upon Approval, the Terms of Sale, as well as your Credit Limit, will be given to you in Writing.

Prior to Approval, it is Necessary that you complete this Packet in its entirety.

Please Check to ensure that the Application is Signed by the Owner or a Corporate Officer and Returned to the following:

Steel Works Stainless

Email - Sales@SteelWorks-Stainless.Com

Office - (770) 864 - 1780

Fax - (770) 680 - 5953

5805 Peachtree Corners East Suite A Peachtree Corners, GA 30092

After your Application is Received, your Application will be Evaluated. Please allow a Minimum of 5 Business Days for the Determination of your Credit Line.

Merely Complying with the Above does not Guarantee Credit Approval. You will be Notified in Writing once a Decision has been made.

STEEL WORKS CUSTOMER APPLICATION 5805 Peachtree Corners East Suite A Peachtree Corners, GA 30092 (770) 864-1780					
Return this application to Sales@steel In order to process your application, this form must be filled out in total, and					
LEGAL BUSINESS NAME (Should match W-9) Read and Complete Carefully	 W-9 (REQUIRED) State Sales Tax Exempt Form State Sales Tax Certificate 				
BUSINESS ENTITY: CORPORATION PARTNEL (Please check one only) NON-PROFIT INDIVIDU					
TAXPAYER ID# (TIN) SSN#	FEIN#				
Customer Information:					
Business Address:					
CONTACT INFORMATION:					
BUSINESS FAX #:					
E-MAIL ADDRESS:					
How did you learn about our company?					
Return to Steel Works Finance Department: 5805 Peachtree Co Mail: 5805 Peachtree Corners East Suite A. Peachtree Corners, ATTN: Phone: 770) 864-1780 Ext: 1 E-Mail: Sales@steelworks-stainless.com					



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Firm Name:				
Billing Addres				
City:		State	:	Zip Code:
Street Addres	s:			
Corporate Phone:		Corporat	e Fax:	
Accounts Payable	Phone	Accounts	s Payable Email:	
Tax Resale # (Please submit form)		Federa	NI ID	
Corporation: Principals & Titles		Partn	ership or	Proprietorship
		Name:		
		S/S #:		
		Name:		
		S/S #:		
Type of Business	 Foodservice Distributor Plumbing Wholesaler O.E.M. 		anroom/Labora erial Handling er	tory
Date Business	Established :	Yea	rs at Presen	t Location:
Bank Referen	ce:		Account #	
Bank Address	:		Phone #:	
City, State and	l Zip:		Fax #:	
Bank Contact:			Email:	
Trade Referer	ices (major supplier nam	es)		
1. Name:	City, State, Zip:			Telephone/Fax #:
Contact:	Email:			
2. Name:	City, State, Zip:		-	Telephone/Fax #:
Contact:	Email:			
3. Name:	City, State, Zip:			Telephone/Fax #:
Contact:	Email:			

► Go to www.irs.gov/FormW9 for instructions and the latest information.

runt or type. Instructions on page 3.	2 Business name/disregarded entity name, if different from above	
	following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate single-member LLC	Exempt payee code (if any)
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) >	
	LLC if the LLC is classified as a single member LLC that is discogarded from the owner unless the owner of the LLC is	Exemption from FATCA reporting code (if any)
г Specific		(Applies to accounts maintained outside the U.S.)
See	5 Address (number, street, and apt. or suite no.) See instructions. Requester's name an	nd address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpaver Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid	Social security number	
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>		
TIN, later.	or	
Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and</i>	Employer identification number	
Number To Give the Requester for guidelines on whose number to enter.		
Part II Certification		

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign	Signature of		
Here	U.S. person ►		

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

•	Form	1099-INT	(interest	earned	or	paid
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· Form 1099-DIV (dividends, including those from stocks or mutual funds)

· Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)

• Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)

Form 1099-S (proceeds from real estate transactions)

Date •

- · Form 1099-K (merchant card and third party network transactions)
- · Form 1098 (home mortgage interest), 1098-E (student loan interest),
- 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



STATE OF GEORGIA DEPARTMENT OF REVENUE SALES TAX CERTIFICATE OF EXEMPTION GEORGIA PURCHASER

To:	SUPPLIER			DATE
	SUPPLIER'S ADDRESS	CITY	STATE	ZIP CODE
	THE UNDERSIGNED HEREBY CERTIFIES that all tangib tax exempt treatment as indicated below. (Check the Appli		eased after this date will o	qualify for tax-free or
	 Purchases or leases of tangible personal property or ser required unless the purchaser is one of the following: chur organization or association, private school (grades K-12), r Scouts of America or Girl Scouts of the U.S.A. TAX-FREE THE PURCHASER, INCLUDING ITEMS THE PURCHASE 	rch, qualifying tax exempt child carin nonprofit entity raising funds for a pu TREATMENT DOES NOT EXTEND	g institution, tax exempt p blic library, member coun TO ANY PURCHASE TO	arent-teacher cils of the Boys D BE USED BY
	 Purchases or leases of tangible personal property or ser municipality of this state, fire districts which have elected g any bona fide department of such governments <u>when paid</u> and use tax number is not required for this exemption. O.C. 	overning bodies and are supported i for directly to the seller by warrant o	n whole or in part by ad v	alorem taxes, or
	3. Sales of tangible personal property and services made to Cross, a Community Service Board located in this state, G qualified authorities provided with a sales tax exemption ur O.C.G.A. §§ 37-2-6.1(d), 48-8-3(8), 50-8-44.	eorgia Department of Community Af	fairs Regional Commissio	ns, or specific
	 The sale, use, consumption, or storage of materials, conshipment or sale. Materials purchased at a retail establishing required for this exemption. O.C.G.A. § 48-8-3(94). 			
	 Aircraft, watercraft, motor vehicles, and other transportal manufacturer or assembler for use exclusively outside this purchaser within this state for the sole purpose of removing lend itself more reasonably to removal by other means. <u>A</u> 3(32). 	state and when possession is taken g the property from this state under it	from the manufacturer or ts own power when the ed	assembler by the uipment does not
	6. The sale of aircraft, watercraft, railroad locomotives and principally to cross the borders of this state in the service of common carrier and contract carrier authority in interstate of Replacement parts installed by carriers in such aircraft, wa an integral part of the craft, equipment, or vehicle are also § 48-8-3(33)(Å).	of transporting passengers or cargo b or foreign commerce under authority atercraft, railroad locomotives and rol	y common carriers and b granted by the United St ling stock, and motor veh	y carriers who hold ates Government. icles that become
	7. Purchases or leases of tangible personal property or ser credit union organized under the laws of this state. <u>A sales</u> 1768; O.C.G.A § 48-6-97.			
	Under penalties of perjury, I declare that I have examined t and correct and made in good faith, pursuant to the sales a personal property obtained under this certificate is subject manner other than indicated above.	and use tax laws of the State of Geol	rgia. Further, I understan	d that any tangible
Purc	haser's Name:	Sales	Tax Number:	
Purc	haser's Type of Business:			(IF REQUIRED)
ourc	haser's Address:			
Print	ed Name and Signature:		Title:	
مام	phone Number:	Email		
i ele	phone Number:			

Supplier must secure and maintain one properly completed certificate of exemption from each purchaser making purchases without the payment of tax.



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Customer Agrees to Steel Works Terms and Conditions

Shipping Policy :

We make every effort to ensure all of our products are packaged as quickly and securely as possible before your order leaves our facility to guarantee your order arrives in picture-perfect condition. Unfortunately, accidents can happen while your order is en route to you. Fortunately, our Insurance covers ALL equipment that has been damaged so long as the following procedures have been followed. For starters, you should never sign for your shipment until you have thoroughly inspected it for damage. Make the truck driver wait while you break down/open/inspect the items. If an item is damaged, or if you have some doubt about possible damage, you NEED to do the following:

- 1. Note any damage clearly on the Bill of Lading* before signing it
- 2. Refuse any Damaged Items
- 3. Keep your copy of the Bill of lading
- 4. Contact us 1 to 3 Business Days after Receiving the Order

*The Bill of Lading is a legal document that states you, the "receiver," accepted your order undamaged and in good condition, clearing the freight company of any future damage claim you might have.

If your shipment is partially or entirely damaged and you did not note this in any way on the Bill of Lading, Insurance will deny the claim, and we will not be able to help repair or replace your damaged items.

Other Tips to Ensure an Easy Delivery:

We use several different freight carriers to ensure the best prices and the fastest shipping for our customers. When the carrier arrives with your items, we recommend you have a plan in place for how you will get this equipment into your building and where it will be placed once it's inside. Remember, this is your responsibility; the truck driver will not be able to help you. Verify the item's specification sheet for all applicable dimensions and installation requirements before placing your order to ensure that it will fit within the space you have allotted for these items, as well as any passages they might need to get through along the way.

Warranty Terms :

Steelworks provides a limited 1-year manufacturer warranty under the company terms. Steelworks warrants all new items under proper use and installation as specified by Steelworks.

Steelwork's warranty is limited to 1 year from the original purchase receipt from the dealers/ distributors to be free from manufacturer defects in material or workmanship.

The terms of exchanging the items or parts will only be determined by Steelworks.

No labor charges are provided in this warranty.

Improper use, installation, or negligence will result in voiding the warranty.

Any inquiries, please feel free to direct your concerns through our authorized dealers.



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Customer Agrees to Steel Works Terms and Conditions

Sales Terms :

1. All orders are subject to inventory availability.

2. Orders will be shipped freight collect except when free shipping program is eligible.

3. Payment Terms: Net 30 days from invoice date on approved credit. Any past due invoice will be subject to 5% interest as the late payment penalty. There will be a \$45.00 charge for any bounced payment check.

4. Free Freight Program: \$3,000 for any orders to customer's registered warehouse address in Eastern and Central Time Zones. \$4,500 for Mountain and Pacific Time Zones within the continental USA. Alaska and Hawaii are excluded. Additional Fees such as residential, limited access, and lift gates would be an additional fee.

5. A \$10 handling fee will be applied for all palletizing and crating.

6. No returned merchandise will be accepted after 14 days upon receiving merchandise. All authorized returns must be with original packing and all accessories must be included. Returned items must be shipped prepaid freight and are subject to a 15% restocking fee.

7. All prices quoted are FOB Steelworks warehouse in Peachtree Corners, Georgia.

8. Steelworks will not be responsible for damaged goods or shortages that are not stated on the freight bill or reported within 24 hours.

9. Due to Steelworks products improvements, prices and specifications are subject to change without prior notice.

The undersigned certifies that the information provided above and on the attached financial statement, if any, is complete and accurate. The undersigned further grants the bank and trade references permission to release pertinent information to BHG Partners LLC DBA SteelWorks regarding their credit status. The undersigned further agrees that all quotations and sales by BHG Partners LLC DBA SteelWorks, its subsidiaries or affiliates, are subject to BHG Partners LLC DBA SteelWorks, its subsidiaries or affiliates, are subject to BHG Partners LLC DBA SteelWorks, its subsidiaries or affiliates, are subject to BHG Partners LLC DBA SteelWorks and in the event of litigation relating in whole or in part to any credit offered as a result of this application, BHG Partners LLC DBA SteelWorks shall be entitled to its reasonable costs and expenses incurred, including attorney's fees and the costs and expenses of enforcing or collecting upon any resulting order or judgment.

X	X	
(Signature)	(Title)	
X(Print Name)	(Name of Business)	
OR INTERNAL USE ONLY:		
Payment Terms:	Approved By:	
Credit Limit:	Date:	