

SF Industries
1910 East Tom Green Street
STE 1A
Brenham TX 77833



979.337.2355
www.sfindustriesusa.com

Dear Sir/Madam,

RE: Customer Accounts

In order to provide your company with credit terms your finance dept will need to complete the attached credit application. Our terms are also attached. You may send a credit reference sheet in lieu of completing the credit reference section only, please complete all other sections of the application form in their entirety - including signature. The Approval process takes 5-10 business days after receipt of credit information. We require a resale or tax-exempt certificate to complete your application. Please submit these with the application form.

Our W9 and our EFT information is available on request from your accounting department.

All account and accounting inquiries may be sent to corporate@sfindustriesusa.com.

All purchase orders, technical assistance and shipping or receiving inquiries may be sent to sales@sfindustriesusa.com.

We look forward to working with you. Should you have any questions please contact me at corporate@sfindustriesusa.com.

Kind Regards,

Simran Grewal
Operations Manager

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CREDIT APPLICATION FOR A COMMERCIAL ACCOUNT

BUSINESS CONTACT INFORMATION

Name of Individual Completing Form:		Title:	
Legal Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:	State:	ZIP Code:	
Date business commenced:		Fed. ID No.:	
Tax Exemption Certificate Attached:		Yes	No
Sole proprietorship:	Partnership:	Corporation:	Other:

BUSINESS AND CREDIT INFORMATION

Primary business address:			
City:	State:	ZIP Code:	
How long at current address?			
Telephone:	Fax:	E-mail:	
Bank name:			
Bank Address:		Bank Contact Name:	Direct Phone:
Type of account	Account number		
Savings			
Checking			

BUSINESS/TRADE REFERENCES (in lieu of cf completeing this section only - you may submit a separate reference document with this completed form)

Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Type of account:			

AGREEMENT

1. Terms: NET 30 DAYS; cash discount 2/10 Net 30
2. PAYMENTS RECEIVED AFTER 30 DAYS WILL BE SUBJECT TO LATE FEES.
3. Claims arising from invoices must be made within seven working days.
4. By submitting this application, you authorize SF Industries LLC to make inquiries into the banking and business/trade references that you have supplied. Customer agrees to make payment in full to SF Industries LLC for all amounts due according to SF Industries LLC invoice(s) and also agrees to pay as interest an amount equal to 1.5% per month or the maximum provided by law (whichever is less) for invoice amounts that are past due. Should customer default in any such payments, SF Industries LLC will have the right, without notice to customer to declare all invoices due and payable. In the event that SF Industries LLC should commence any action or actions, or otherwise seek to enforce this agreement against Customer, Customer agrees to pay reasonable fees, court costs and other expenses incurred by SF Industries LLC whether or not suit is filed. This agreement is strictly confidential and is not transferable or assignable without prior written consent of SF Industries LLC Customer agrees that any changes in liability for any debts incurred to SF Industries LLC due to a change in the customer's form of business shall be effective as to SF Industries LLC until SF Industries LLC receives actual notice of the change by certified mail. **This agreement shall become effective by entering your name electronically on this agreement where indicated below OR with authorized hand written signature.**
5. I/We authorize the release of credit and banking information to SF Industries LLC by the references listed above or provided separately in conjunction with this application. I/We further agree that this agreement shall be governed by and construed in accordance with the laws of the State of Texas with venue and jurisdiction in Harris County, Texas. I understand that any information provided in conjunction with this application is given for the purpose of obtaining credit and I certify that to the best of my knowledge, the above information is complete and accurate as of the date of this application.

SIGNATURES

Name:	Name:
Title:	Title:
Date:	Date:

Texas Sales and Use Tax Resale Certificate

Name of purchaser, firm or agency as shown on permit	Phone (Area code and number)											
Address (Street & number, P.O. Box or Route number)												
City, State, ZIP code												
Texas Sales and Use Tax Permit Number (must contain 11 digits)												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> <td style="border: 1px solid black; width: 25px; height: 15px;"></td> </tr> </table>												
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 250px; height: 15px;"></td> <td style="padding-left: 10px;">(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)</td> </tr> </table>			(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)									
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I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:

Seller: _____

Street address: _____

City, State, ZIP code: _____


Description of items to be purchased on the attached order or invoice:

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

 Purchaser	Title	Date
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This certificate should be furnished to the supplier.

Do not send the completed certificate to the Comptroller of Public Accounts.

Texas Sales and Use Tax Exemption Certification

This certificate does not require a number to be valid.

Name of purchaser, firm or agency	
Address (Street & number, P.O. Box or Route number)	Phone (Area code and number)
City, State, ZIP code	

I, the purchaser named above, claim an exemption from payment of sales and use taxes (for the purchase of taxable items described below or on the attached order or invoice) from:

Seller: _____

Street address: _____ City, State, ZIP code: _____

Description of items to be purchased or on the attached order or invoice:

Purchaser claims this exemption for the following reason:

I understand that I will be liable for payment of all state and local sales or use taxes which may become due for failure to comply with the provisions of the Tax Code and/or all applicable law.

I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase, will be used in a manner other than that expressed in this certificate, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

Purchaser sign here ▶	Title	Date
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NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

**This certificate should be furnished to the supplier.
Do not send the completed certificate to the Comptroller of Public Accounts.**