

OFFICIAL DISTRIBUTOR

APPLICATION FOR BUSINESS CREDIT

OFFICE USE ONLY:
REP:
MGMT CO

CUSTOMER TYPE:

Office: (916) 899-5025

For the purpose of procuring and obtaining credit accommodations as they may be extended from time to time, Applicant(s) furnishes the following including any and all addenda. Applicant(s) warrants and represents said information truly and completely reflects its financial condition.

Please Type or Print Legibly (Incomplete or unreadable application my delay credit investigation)

Name of Firm:					
Billing Address:		Ci	ty:	State:	Zip:
Shipping Address		Ci	ty:	State:	Zip:
County:	Phone: _		Fax:		
Accounting Contact		E	-Mail		
Date business commen	ced:	Annual S	Sales:		
Important: Attach most recent	t financial statement if c	redit limit requested is \$	5000 or more, or if	in business less than 2	yrs.
P.O.#'s Required?		Are you subi	mitting a resale	certificate: Yes	No
Please Check One:	Sole Proprie	etor Partners	hip Co	orporation	
Please specify Has this firm of any other insolvency proceed	or any principals, themse ings? Yes or No (if yes	elves, or through associa , please attach letter wit	ation with another fi h explanation)	rm, ever been involved	in bankruptcy or
Names of Principals	<u>Address</u>	<u>City/State</u>	<u>Title</u>		
1					
Following are our four princ	ipal trade references.	 We authorize vou to co	ontact them to obt	ain our credit experier	 nce with these
firms: (Important! Fax numb				,	
Nama	Address	Dhana	Ea.,		A
<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Fax</u>		Account
Bank Reference					
Address:		Accou	unt Numbers:		
Address:					



The above information is submitted for the purpose of obtaining credit from PRG Americas, LLC and is warranted to be true. Applicant signature attests to financial responsibility, ability and willingness to pay all invoices in accordance with invoice terms.

(Initial here)

Terms of Payment: All invoices are due and payable Net 30 days.

A monthly late charge of 1.5% or the maximum allowed by law, whichever is greater; will be assessed on any outstanding balance.

All accounts not paid when due may be reported to credit reporting services; Applicant and Guarantor(s), in addition to the principal balance due, shall be liable for all costs of collection including but not limited to agency and attorney's fees and court costs. Should litigation be filed to enforce any of the agreements contained herein, I/we agree to jurisdiction and venue in **Placer County, California**. Applicant and Guarantor(s) further agrees to notify Seller in writing of any change in ownership and further agrees that all charges incurred will remain their responsibility unless agreed to by Seller in writing. Applicant/Guarantor authorizes seller to obtain a written non-business credit report to further evaluate the credit worthiness of the undersigned as principal(s), proprietor(s) and/or guarantor(s) as needed in connection with the extension or continuation of the business credit represented by this application, and hereby knowingly consent to the use of such credit report consistent with the Federal Fair Credit Reporting Act(15 USC 1681 et seq).

Date:			
Individual Applicant/Guarantor:		S/S #:	
	(Sign Here in Ink Please)		(Required if in business less than 2 years)
Company Authorization:		Title:	
_	(Authorized Officer Sign Here in Ink Please)		<u> </u>

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Continuing Guaranty

The undersigned, being an Officer, director, stockholder or other authorized person or agent of the credit applicant, in consideration of the extension of credit and the sale and delivery by PRG Americas, LLC, or supplies, fixtures and other merchandise to the applicant, on such terms and conditions as PRG Americas, LLC, may from time to time extend to the applicant, does hereby guaranty (jointly and severally, if more than one) absolutely and unconditionally to PRG Americas, LLC the prompt payment of any and all amounts, monies or sums now due or which may hereafter become due as a result of the extension of credit or the sale of merchandise and material or upon any other indebtedness of applicant to PRG Americas, LLC, whether for merchandise or material, or other indebtedness, or as evidenced by any note, trade acceptance or open book account, without necessity of recourse first to applicant. The undersigned agrees to pay all costs of collection, including fees to any collection agency, court costs, expenses of collection, including reasonable attorney fees.

The undersigned hereby consent(s) to PRG Americas, LLC's use of a non-business consumer credit report on the undersigned in order to further evaluate the credit worthiness of the undersigned as principal(s), proprietor(s) and/or guarantor(s) in connection with the extension of business credit as contemplated by this credit application. The undersigned hereby authorize(s) PRG Americas, LLC to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the business credit represented by this credit application. The undersigned as (an individual(s) hereby knowingly consent to the use of such credit report consistent with the Federal Fair Credit Reporting Act as contained in 15 U.S.C. @ 1681 et seq.

Date			
GUARANTOR(S)			
Signature			
	Name (please print or type)	Social Security Number	
Signature			
	Name (please print or type)	Social Security Number	

Office: (916) 899-5025

Form (Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do no	t leave this line blank.												
	PRG AMERICAS LLC 2 Business name/disregarded entity name, if different from above													
on page 3.	following seven boxes. Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate					in	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):							
/pe.								Exempt payee code (if any)						
Print or type. See Specific Instructions on page	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ P Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					at co	Exemption from FATCA reporting code (if any)							
oec	Other (see instructions)		D	1 -		-	(Applies to accounts maintained outside the U.S.) and address (optional)							
S	5 Address (number, street, and apt. or suite no.) See instructions.		Reques	ters	name	e and	add	iress	(optic	naı)				
Se	269 TECHNOLOGY WAY STE 4													
	6 City, state, and ZIP code													
	ROCKLIN, CA 95765													
	7 List account number(s) here (optional)													
De	Town and I double out to a Name of TINI				_									
Par			-1-1	Sor	iale	ocuri	ty n	umh	or	-				
	your TIN in the appropriate box. The TIN provided must match the name g p withholding. For individuals. this is generally your social security numbe			300	Social security number									
reside	nt alien, sole proprietor, or disregarded entity, see the instructions for Part	I, later. For other	, ,				-			-			+ 1	
entitie	s, it is your employer identification number (EIN). If you do not have a num		ta				Į							
TIN, la]	or	nlov	er ide	r identification number							
	If the account is in more than one name, see the instructions for line 1. Alser To Give the Requester for guidelines on whose number to enter.	so see vvnat ivame a	ana	Lin	pioy	er identification number						╡		
rvarrio	or to dive the requester for guidelines on whose number to enter.			4	5	-	1	6	7	7 6	6	0		
Par	t II Certification													
Under	penalties of perjury, I certify that:													
2. I an Ser	number shown on this form is my correct taxpayer identification number n not subject to backup withholding because: (a) I am exempt from backup vice (IRS) that I am subject to backup withholding as a result of a failure to longer subject to backup withholding; and	withholding, or (b)	Ihave	not b	een	notif	fied	by t	he In	terna	al Re me	ven that	ue I am	
3. I ar	n 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 fr	om FATCA reporting	g is cor	rect.										
you ha	ication instructions. You must cross out item 2 above if you have been notificate failed to report all interest and dividends on your tax return. For real estate sition or abandonment of secured property, cancellation of debt, contributions than interest and dividends, you are not required to sign the certification, but y	transactions, item 2 to an individual retire	does no	ot ap	ply. eme	For m	nort	gage and	inter gene	est p rally,	aid, pay	men	ts	
Sign Here		С	Date ▶	4/	28	3/5	re	2	2					
Ge	ierai insuructions	Form 1099-DIV (div	vidends	, incl	udir	ng the	ose	from	stoo	ks o	r mı	ıtual		
Section	on references are to the Internal Revenue Code unless otherwise			i										

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)

- 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)
- 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.