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 LeRoy, NY 14482
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BUFFALO, NY

LIMA (ROCHESTER), NY

SYRACUSE, NY

CHARLOTTE, NC

DENVER, NJ

APPLICATION FOR CREDIT

Customer Name: _____

Bill to: _____ Ship To: _____

Phone: () _____ Phone: () _____

Fax: () _____ Fax: () _____

FED ID OR SS#: _____ Corp _____ Partnership _____ Other _____

(Tax will be charged unless a Tax Exempt Certificate is attached)

CREDIT LIMIT REQUESTING:

Purchase Order Numbers Required? Yes NoDo you allow backorders? Yes NoPlease list your preferred freight billing method: PPD & Add UPS Acct #: _____

Preferred Truck Carrier: _____

Accounts Payable Information:

Contact Name: _____

A/P Phone: _____ ext: _____ A/P Fax: _____

Accounts Payable Email Address: _____

Please check your preferred method of receiving invoices:

 Fax to: _____ US Mail Email address to send invoices to: _____

Please attach your reference sheet or fill out the attached reference information so that we can get your account set up as quickly as possible.

I present this application for the purpose of obtaining credit with Northeast Industrial Technologies, Inc. I authorize you to check our credit history with references listed above. Customer recognizes terms of credit to be NET 30 days (special terms are available with written approval from vendor). Return merchandise will not be accepted without prior approval. We reserve the right to apply a restocking charge to returned merchandise. Customer agrees to pay all charges with US Dollars within terms. Customer agrees to pay a late charge of 1.5% per month on past due unpaid balances. In addition, customer agrees to pay all collection fees, including attorneys fees and court costs, incurred in the collection of past due amounts.

Sign Name_____
Print Name_____
Date



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APPLICATION FOR CREDIT

Customer Name: _____

BANK REFERENCE:

Name: _____

Phone: () _____

Address: _____

Contact: _____

TRADE REFERENCES:

Name: _____

Phone: () _____

Address: _____

Fax: () _____

Name: _____

Phone: () _____

Address: _____

Fax: () _____

Name: _____

Phone: () _____

Address: _____

Fax: () _____

Name: _____

Phone: () _____

Address: _____

Fax: () _____

I present this application for the purpose of obtaining credit with Northeast Industrial Technologies, Inc. I authorize you to check our credit history with references listed above.

Sign Name

Print Name

Date

Request for Taxpayer Identification Number and Certification

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

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

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. NORTHEAST INDUSTRIAL TECHNOLOGIES	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ 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. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.) See instructions. 7620 EVERGREEN ST	Requester's name and address (optional)
6 City, state, and ZIP code LIMA, NY 14485	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid 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 *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
1	6	-	1	4	5	4	5	3	8

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 Here

Signature of U.S. person ▶

Date ▶

JAN 03 2018

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)

- 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)
- 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.