



OFFICIAL DISTRIBUTOR

**APPLICATION FOR BUSINESS CREDIT**

OFFICE USE ONLY:

REP: \_\_\_\_\_

MGMT CO. \_\_\_\_\_

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 may delay credit investigation)

**Name of Firm:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Shipping Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Accounting Contact:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Date business commenced:** \_\_\_\_\_ **Annual Sales:** \_\_\_\_\_

Important: Attach most recent financial statement if credit limit requested is \$5000 or more, or if in business less than 2 yrs.

P.O.#'s Required? \_\_\_\_\_

**Please Check One:**     Sole Proprietor     Partnership     Corporation

Please specify Has this firm or any principals, themselves, or through association with another firm, ever been involved in bankruptcy or any other insolvency proceedings? Yes or No (if yes, please attach letter with explanation)

<u>Names of Principals</u>	<u>Address</u>	<u>City/State</u>	<u>Title</u>

Following are our four principal trade references. We authorize you to contact them to obtain our credit experience with these firms: (Important! Fax numbers and area codes will accelerate application processing)

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Fax</u>	<u>Account#</u>

**Bank Reference**

Address: \_\_\_\_\_ Account Numbers: \_\_\_\_\_

Address: \_\_\_\_\_ Account Numbers: \_\_\_\_\_



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)



## 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

# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>PRG AMERICAS LLC</b></p> <p><b>2</b> Business name/disregarded entity name, if different from above</p>	
	<p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC                 <input type="checkbox"/> C Corporation                 <input type="checkbox"/> S Corporation                 <input type="checkbox"/> Partnership                 <input type="checkbox"/> Trust/estate  <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <b>P</b>  <small><b>Note:</b> 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 <b>not</b> 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.</small>  <input type="checkbox"/> Other (see instructions) ▶         </p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions. <b>269 TECHNOLOGY WAY STE 4</b></p> <p><b>6</b> City, state, and ZIP code <b>ROCKLIN, CA 95765</b></p> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

### 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.

<b>Social security number</b>									
or									
<b>Employer identification number</b>									
4	5	-	1	6	7	7	6	6	0

### 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.

<b>Sign Here</b>	Signature of U.S. person ▶ <i>Danielle Walker</i>	Date ▶ <i>4/28/2022</i>
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### 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](http://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.*