



STEEL ASSOCIATES, INC.

P.O. BOX 10
GALENA PARK, TX 77547
(713) 921-1400 FAX (713) 881-9012

CREDIT APPLICATION AND AGREEMENT

CUSTOMER INFORMATION:

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ FAX _____

EMAIL ADDRESS: _____

BILLING ADDRESS (IF DIFFERENT FROM ABOVE) _____

CITY _____ STATE _____ ZIP _____

TYPE OF BUSINESS: _____CORPORATION _____PARTNERSHIP _____SOLE PROPRIETORSHIP

DIVISION, SUBSIDIARY, OR BRANCH OF _____

TYPE OF BUSINESS _____ YEAR ESTABLISHED _____

FEDERAL ID # _____ TAX EXEMPT? _____ SALES TAX # _____

PLEASE FILL OUT AND RETURN APPROPRIATE ATTACHED SALES TAX FORM

PERSONAL INFORMATION:

WHO IS COMPLETING THIS APPLICATION? _____

TITLE _____ AUTHORITY TO ENTER INTO THIS AGREEMENT? _____

PRINCIPLE OFFICER(S) _____

TRADE REFERENCES:

NAME _____ CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

NAME _____ CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

NAME _____ CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

BANK REFERENCES:

NAME _____ CITY _____ STATE _____ ZIP _____
CONTACT _____ PHONE # _____ ACCT.# _____
FAX # _____

THE APPLICANT AND/OR SIGNATORY REPRESENTS AND WARRANTS THAT THE ABOVE INFORMATION IS TRUE, CORRECT AND COMPLETE. THEY ACKNOWLEDGE THAT THE INFORMATION GIVEN IN THIS APPLICATION WILL BE RELIED UPON BY STEEL ASSOCIATES, INC. FOR THE PURPOSE OF GRANTING (OR DENYING) CREDIT. THE APPLICANT REALIZES THAT ANY FAILURE TO COMPLETELY AND ACCURATELY DISCLOSE THE INFORMATION REQUESTED WILL CONSTITUTE A BREACH OF ANY AGREEMENT WHICH MAY BE ENTERED INTO WITH STEEL ASSOCIATES, INC. STANDARD (OPEN ACCOUNTS) PAYMENT TERMS ARE NET 30 DAYS (DUE DATE FROM INVOICE DATE.) WE AGREE TO THE PROPER PAYMENT IN CONSIDERATION OF EXTENDED CREDIT. IT IS AGREED THAT A SERVICE CHARGE OF 1-1/2% MAY BE CHARGED ON ALL DELINQUENCIES, OR THE HIGHEST RATE PERMITTED BY PREVAILING STATE LAW, WHICHEVER IS LOWER.

THE APPLICANT AUTHORIZES STEEL ASSOCIATES, INC. TO CHECK CREDIT VIA A CREDIT REPORTING AGENCY AND FURTHER AUTHORIZES ANY BANK OR COMMERCIAL BUSINESS TO GIVE STEEL ASSOCIATES, INC. THE INFORMATION NECESSARY TO THEIR CREDIT INVESTIGATION. STEEL ASSOCIATES, INC. RESERVES THE RIGHT TO RECHECK CREDIT FROM TIME TO TIME IN THE FUTURE IF THEY DEEM THIS IS NEEDED. THE APPLICANT AGREES TO PAY REASONABLE COSTS AND EXPENSES SHOULD LEGAL RECOURSE BECOME NECESSARY, INCLUDING ALL ATTORNEY FEES AND COSTS TO ENFORCE AND PROCURE PAYMENT. APPLICANT AGREES THAT THE LAWS OF TEXAS SHALL GOVERN THIS AGREEMENT AND THAT JURISDICTION AND VENUE SHALL BE IN GALENA PARK, HARRIS COUNTY, TEXAS.

SIGNED _____ TITLE _____ DATE _____

CONTINUING GUARANTEE:

IN CONSIDERATION OF STEEL ASSOCIATES, INC. EXTENDING CREDIT HEREUNDER, THE UNDERSIGNED PERSONALLY, JOINTLY AND SEVERALLY AND UNCONDITIONALLY GUARANTEE AND PROMISE TO PAY STEEL ASSOCIATES, INC. ON DEMAND, ANY ALL INDEBTEDNESS OF THE ABOVE NAMED APPLICANT TO STEEL ASSOCIATES, INC.. THIS IS A CONTINUING GUARANTEE AND THE OBLIGATIONS CREATED HEREBY ARE UNAFFECTED BY ANY CHANGE IN THE TERMS OF THE ORIGINAL INDEBTEDNESS BETWEEN STEEL ASSOCIATES, INC. AND THE ABOVE NAMED APPLICANT, SAVE THAT OF PAYMENT. THIS GUARANTEE SHALL CONTINUE IN EFFECT UNTIL THE UNDERSIGNED HAS NOTIFIED STEEL ASSOCIATES, INC. IN WRITING OF ITS CANCELLATION, BUT SUCH CANCELLATION SHALL NOT ALTER ANY OBLIGATION OF THE UNDERSIGNED PRIOR TO RECEIPT OF SUCH WRITTEN NOTICE.

X _____ DATE: _____

X _____ DATE: _____

STEEL ASSOCIATES, INC.

CUSTOMER SHIPPING INFORMATION

CUSTOMER NAME: _____

PHYSICAL ADDRESS: _____

CITY _____ STATE _____ ZIP _____

MAILING ADDRESS: _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ FAX _____

E-MAIL ADDRESS _____

PREFERRED SHIPPING METHOD: _____

SHIP TO ADDRESS: _____

CITY _____ STATE _____ ZIP _____

SECONDARY SHIP TO: _____

CITY _____ STATE _____ ZIP _____

SPECIAL INSTRUCTIONS: _____



STEEL ASSOCIATES, INC.

Credit Department

P.O. BOX 10

GALENA PARK, TX 77547

Main (713) 921-1400 Fax (713) 921-4525

Paperless Billing

Dear Valued Customers;

We have recently switched over to paperless billing. In order to continue to serve each of our customers' specific needs, we are offering either faxed or emailed copies of invoices. If you have any questions, please contact us directly at (713) 921-1400.

Respectfully Yours,

Steel Associates, Inc.

Please Detach & Return Via Fax (713)881-9012

Customer: _____

Accounts Payable Contact: _____

Contact Number: _____

Email: _____

Fax Number: _____

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 border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>												
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) number for retailers based in Mexico												
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;"></td> </tr> </table> (Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)												

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: STEEL ASSOCIATES, INC.

Street address: P.O. BOX 10

City, State, ZIP code: GALENA PARK, TX 77547


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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TEXAS SALES AND USE TAX EXEMPTION CERTIFICATION

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: **STEEL ASSOCAITES, INC.**

Street address: **P.O. BOX 10** City, State, ZIP code: **GALENA PARK, TX 77547**

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.

sign here ▶	Purchaser	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.