

FROM DESIGN TO REALITY SINCE 1987 . WISCONSIN USA

NEW CUSTOMER INFORMATION REQUEST

Thank you for considering Northern Metal Fab, Inc. as your supplier. Attached you will find a packet of information we ask you to fill out in advance of your order. The packet includes a request for credit references and release of bank information, if you have your own credit reference form please feel free to substitute your form but do include a release for bank information. Also included is our W-9 form and a request for a Sales Tax Exemption Certificate. The last attachment is a questionnaire we ask you to complete to let us know how you would like to receive your future invoices.

This is all standard information but it will give us a head start on setting up your account prior to us receiving your purchase order.

All information will be kept strictly confidential.

Regards,

Tracy Lillie Northern Metal Fab, Inc. Direct phone: (715)684.7417 Email: tracy.lillie@nmfinc.com



METAL FAB

FROM DESIGN TO REALITY SINCE 1987 • WISCONSIN USA

APPLICATION FOR CREDIT

COMPANY INFORMATION				
Business Name	Telephone Number	Fax Number		
Street Address	City/State/Zip Code			
	0: 10: 17: 0 1			
Billing Address (if different than above)	City/State/Zip Code			
Accounts Payable Contact	CFO/Controller	Credit Amount Requested		
Accounts I ayable Contact	Cr-O/ Controller	Credit Amount Requested		
Legal Entity				
☐ Sole Proprietor ☐ Partnership ☐ Cor	poration Subsidiary of Cor	noration		
1	mpt #(please attach certificate	-		
		,		
If subsidiary, list Parent Company Nam	e and Address Years in Busin	ess Years at Above Location		
* *				
List Names of Officers, or Owner, or Pa	rtners Names Title	Social Security Number		
TRADE REFERENCES	77.11	#/E: #/A:::::#		
Company Name and Address	Telephone	#/ Fax # / Account #		
Company Name and Address	Telenhone	#/ Fax # / Account #		
	Telephone	TI TAN TICOUNT		
Company Name and Address	Telephone	#/ Fax # / Account #		
		.,,		
BANK REFERENCE	Talankana	#/E# / A#		
Bank Name and Address	Telephone	#/Fax # / Account #		
<u> </u>				
Applicant's signature certifies that the in	nformation provided is correct	and is an authorized signer for the		
Applicant. A service charge will be appl				
seriously past due, I am aware that I will be held responsible for any legal and/or collection fees assessed to				
collect the debt.				
I authorize the release of bank and cred	it information regarding our ac	counts by the above references to		
Northern Metal Fab. A photocopy of this application will be acceptable in place of the original. The				
undersigned authorizes Northern Metal		commercial credit reporting to		
determine overall credit and financial st	atus.			
Print Name	Signature	Date		

NORTHERN METAL FAB, INC.

500 Evergreen Street Baldwin, WI 54002

tel: 715.684.3535 fax: 715.684.3639

https://www.nmfinc.com



CREDIT AUTHORIZATION

Date:
Credit Check/Bank Authorization
Company Name:
Address:
I hereby authorize release of Credit/Bank Information to Northern Metal Fab
Signed:
Date:
Banking Information
Name of Banking Institution:
Banking Officer:
Telephone:
Account Numbers
Checking:
Savings:
Loans:

NORTHERN METAL FAB, INC.

500 Evergreen Street Baldwin, WI 54002

tel: 715.684.3535 fax: 715.684.3639

https://www.nmfinc.com



The undersigned individual(s) (hereinafter collectively referred to as "Guarantor") in consideration of the extension of credit by Northern Metal Fab, its affiliates and subsidiaries (hereinafter collectively referred to as "Northern Metal Fab") to the Applicant, hereby agrees to jointly, severally and unconditionally guarantee payment when due of any and till present or future indebtedness owed to Northern Metal _ {hereinafter "Applicant"). This instrument shall be considered as an absolute. unconditional. general arid continuing Guaranty until terminated by the undersigned giving written notice thereof to Northern Metal Fab. This notice shall be sent to Northern Metal Fab' place of business located at 500 Evergreen Street, Baldwin, WI 54002, care of credit manager, by certified mail, return receipt requested. The Guarantors notice, of termination shall not affect the Guarantor's liability hereunder with respect to any obligations of the Guarantor to Northern Metal Fab arising prior 10 receipt of such notice of termination.

The Guarantor additionally guarantees the payment of interest at the maximum lawful rate on all monies outstanding to Northern Metal Fab by Applicant. In the event that Northern Metal Fab retains the services of an attorney or collection agency to effect the collection or any monies owed, the Guarantor as guarantor of Applicant agrees to pay all costs and fees incurred, including but not limited to reasonable attorney's fees, whether suit be brought or not, costs and attorney's fees of appeal, the recording of a claim of lien and/or a surety bond claim, and/or any litigation. The Guarantor hereby waives any right or privilege conferred by statute, rule or otherwise requiring Northern Metal Fab to bring any suit, action or proceeding against Applicant on the indebtedness as a prerequisite to Northern Metal Fab' institution of any suit, action or proceeding against the Guarantor, arising out or related to this Guaranty. In the event of any default by Applicant, Norther Metal Fab may institute collection proceedings, including one or more actions against the Guarantor, an invoice any legal or equitable remedies in such actions without notice to or demand upon Applicant or Guarantor, and without being obligated to proceed in any way against Applicant in connection with any obligation guaranteed hereunder or to pursue any other security held by or available to Northern Metal Fab and without affecting such security. The Guarantor hereby waives trial by jury in any action or proceeding arising out of or in connection with this Guaranty. Further, the Guarantor hereby submits himself (or herself) to the jurisdiction of the State of Wisconsin in the event suit is brought in connection with any claims by Northern Metal Fab regarding the guaranty of payment, and agrees that venue, at the sole election of Northern Metal Fab, shall be in the County of St. Croix, Wisconsin or the county and state from which Northern Metal Fab' goods were shipped. It is understood that this personal guaranty shall remain in full force and effect regardless of whether or not Applicant files for bankruptcy, becomes insolvent or is otherwise dissolved. Further Applicant waives all homesteads and exemption rights (particularly rights under Wisconsin Statues if applicable) and to the extent permitted under applicable State law.

Signature	Date	Signature	Date
Print Name		Print Name	
further evaluate the creditworth of business credit as contemplat credit report on the undersigned	iness of the undersigned as ed by this Credit Application I from time to time in conne ersigned as (an) individual(s)	principal(s), proprietor(s) and/or gun. The undersigned hereby authorized the undersigned hereby authorized the undersigned th	dit report on the undersigned in order to uarantor(s) in connection with the extension es Northern Metal Fab to utilize a consumer lation of the business credit represented by se of such credit report consistent with the
Signature	Date	Signature	 Date
Print Name		Print Name	
Street Address		Street Address	
City, State, Zip		City, State, Zip	
Social Security No.		Social Security No.	

(Rev. January 2011) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

	Name (as shown on your income tax return) Northern Motal Fab, Inc.					
ge 2.	Business name/disregarded entity name, if different from above					
Da	Check appropriate box for federal tax				\top	
ns on	classification (required): Individual/sole proprietor C Corporation	Partn	ership 🔲	Trust/estate	,	
Print or type Specific Instructions on page	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partne	rship) 🕨			Exer	mpt payee
Pri i	☐ Other (see instructions) ▶					
_ ∺	Address (number, street, and apt. or suite no.)	Requester'	s name and	address (op	tional)	
ĕ	500 Everaveen Street					
See S	City, state, and ZIP code Baldwin WI 54002					
	List account number(s) here (optional)					
Pa	rt I Taxpayer Identification Number (TIN)					
	your TIN in the appropriate box. The TIN provided must match the name given on the "Name	"line Se	ocial securi	ty number		
to av	oid backup withholding. For individuals, this is your social security number (SSN). However, for	ora 🔚			ITT	
	ent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For othe			-	-	
	entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i> TIN on page 3.					
	. If the account is in more than one name, see the chart on page 4 for guidelines on whose	E	nployer ide	ntification	number	
	per to enter.		П			
		3	9 -	102	8 7	0 7
Pai	rt II Certification					
Unde	er 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. Ta	am a U.S. citizen or other U.S. person (defined below).					
beca intere gene instru	fication instructions. You must cross out item 2 above if you have been notified by the IRS to use you have failed to report all interest and dividends on your tax return. For real estate transfest paid, acquisition or abandonment of secured property, cancellation of debt, contributions really, payments other than interest and dividends, you are not required to sign the certification actions on page 4.	sactions, ite to an individ	m 2 does i dual retiren	not apply. nent arranç	For mortga gement (IR	age A), and
Sign	1 Signature of		î	4		

General Instructions

Signature of

U.S. person ▶

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

Here

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- · An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or

Date ▶

• A domestic trust (as defined in Regulations section 301,7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.



Check One

Wisconsin Sales and Use Tax Exemption Certificate

Do not send this certificate to the Department of Revenue

S-211

Purchaser: Complete this certificate and give it to the seller.

Single Purchase

Seller: If this certificate is not fully completed, you must charge sales tax. Keep this certificate as part of your records.

Continuous

Pι	irchaser Information				_	
Business Name			Type of E	Business		
Business Address		City	State	ZIP Code		
D	nah an an'a Tay ID Niverban				Chata of lance	
Pu	rchaser's Tax ID Number				State of Issue	
		FEIN	Driver's License Number/State Iss	uod ID Nu	ımber State of Issue	
	to Tax ID Number, enter one the following:	FEIN	Driver's License Number/State iss	ued ID Nu	Iniber State of Issue	
Se	eller Information					
Na	me					
Ad	dress		City	State	ZIP Code	
		Doo	oon for Evenntion			
		Kea	son for Exemption			
	Resale (Enter purchase	er's seller's permit or use tax	certificate number)			
Ma	anufacturing and Biotech	hnology				
Tangible personal property (TPP) or item under s.77.52(1)(b) that is used exclusively and directly by a manufacturer in manufacturing an article of TPP or items or property under s.77.52(1)(b) or (c) that is destined for sale and that becomes an ingredient or component part of the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale or is consumed or destroyed or loses its identity in manufacturing the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale. Machines and specific processing equipment and repair parts or replacements thereof, exclusively and directly used by a manufacturer in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) and safety attachments for those machines and equipment. The repair, service, alteration, fitting, cleaning, painting, coating, towing, inspection, and maintenance of machines and specific processing equipment, that the above purchaser would be authorized to purchase without sales or use tax, at the time the service is performed. Tools used to repair exempt machines are not exempt. Fuel and electricity consumed in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) in this state. Percent of fuel exempt:						
Fa			must use item(s) exclusively and lture, silviculture, beekeeping or		n the business of farming, including arming services.)	
	Tractors (except lawn and garden tractors), all-terrain vehicles (ATV) and farm machines, including accessories, attachments, and parts, lubricants, nonpowered equipment, and other tangible personal property or items or property under s.77.52(1)(b) or (c) that are used exclusively and directly, or are consumed or lose their identities in the business of farming. This includes services to the property and items above.					
	Feed, seeds for planting, plants, fertilizer, soil conditioners, sprays, pesticides, and fungicides.					
	Breeding and other livestock, poultry, farm work stock, bees, beehives and bee combs.					
	Containers for fruits, vegetables, bee products, grain, hay, and silage (including containers used to transfer merchandise to customers), and plastic bags, sleeves, and sheeting used to store or cover hay and silage. Baling twine and baling wire.					
	Animal waste containers or component parts thereof (may only mark certificate as "Single Purchase").					
	Animal bedding, drugs fo	or farm livestock or on bees,	and milk house supplies.			

G	overnmental Units and Other Exempt Entities	Enter C	CES No., if applicable			
	The United States and its unincorporated agencies and instrumentalities	es				
	Any federally recognized American Indian tribe or band in this state.					
	Wisconsin state and local governmental units, including the State of Wisconsin or any agency thereof, Wisconsin counties, cities villages, or towns, and Wisconsin public schools, school districts, universities, or technical college districts.					
	Organizations organized and operated exclusively for religious, charitable, scientific, or educational purposes, or for the prevention of cruelty to children or animals. CES Number(Required for Wisconsin organizations).					
01	ther					
	Containers and other packaging, packing, and shipping materials, use	d to transfe	er merchandise to customers	of the purchaser.		
	Trailers and accessories, attachments, parts, supplies, materials, and service for motor trucks, tractors, and trailers which are used exclusively in common or contract carriage under LC, IC, or MC No. (if applicable)					
	Machines and specific processing equipment used exclusively and disoperation, including repair parts, replacements, and safety attachments	-	fertilizer blending, feed millin	g, or grain drying		
	Building materials acquired solely for and used solely in the construction or repair of holding structures used for weighing an dropping feed or fertilizer ingredients into a mixer or for storage of such grain, if such structures are used in a fertilizer blending feed milling, or grain drying operation.					
	Tangible personal property purchased by a person who is licensed to operate a commercial radio or television station in Wisconsin if the property is used exclusively and directly in the origination or integration of various sources of program material for commercial radio or television transmissions that are generally available to the public free of charge without a subscription or service agreement					
	Fuel and electricity consumed in the origination or integration of varietelevision transmissions that are generally available to the public free or		. 0			
	Percent of fuel exempt: % Percent of electric	city exempt	t: %			
	Tangible personal property and items, property and goods under s.77.52(1)(b), (c), and (d) to be resold by on my behalf where					
_	is registered to collect and remit sales tax to the Department of Revenu					
	Tangible personal property, property, items and goods under s.77.52(1)(b), (c), and (d), or services purchased by a Native Americar with enrollment #, who is enrolled with and resides on the Reservation, where buyer will take possession of such property, items, goods, or services.					
	Tangible personal property and items and property under s.77.52(1)(b) and (c) becoming a component of an industrial or municipal waste treatment facility, including replacement parts, chemicals, and supplies used or consumed in operating the facility. Caution: Do not check the "continuous" box at the top of page 1.					
	Portion of the amount of electricity or natural gas used or consumed in (Percent of electricity or natural gas exempt%)	an industria	al waste treatment facility.			
	Electricity, natural gas, fuel oil, propane, coal, steam, corn, and wood (i	ncluding wo	ood pellets which are 100% w	ood) used for fuel		
	for residential or farm use. % of Electricity % of Exempt	f Natural Ga Exempt	as % of Fuel Exempt			
	Residential		%			
	Farm		%			
	Address Delivered:					
	Percent of printed advertising material solely for out-of-state use%					
	Catalogs, and the envelopes in which the catalogs are mailed, that are designed to advertise and promote the sale of merchandise or to advertise the services of individual business firms.					
	Computers and servers used primarily to store copies of the product that are sent to a digital printer, a plate-making machine, or a printing press or are used primarily in prepress or postpress activities, by persons whose NAICS code is 323111, 323117, or 323120.					
	Purchases from out-of-state sellers of tangible personal property that are temporarily stored, remain idle, and not used in this state and that are then delivered and used solely outside this state, by persons whose NAICS code is 323111, 323117, or 323120.					
	Other purchases exempted by law. (State items and exemption).					
the	eclare that the information provided is complete and accurate to the best of my e exempt manner indicated. If a product is not used in an exempt manner, I will e. I understand that failure to remit the use tax may result in a future liability, i	remit use ta	ix on the purchase price at the t			
_	AUTION: Using this certificate to avoid paying sales tax may result in a fine of	\$250 for ea				
Sig	gnature of Purchaser Print or Type Name		Title	Date		



METAL FAB

FROM DESIGN TO REALITY SINCE 1987 . WISCONSIN USA

Dear Valued Customer,

We now fax or email your invoices to you instead of sending them in the mail, unless that is your preferred way to receive invoices.

Invoices will be faxed or emailed the same day that they are processed and sent to the representative you note below. We would also like to know if you need of copies of packing lists and or bill of ladings. If you do not need this information sent to you, please let me know at the bottom of this letter.

Please complete the bottom of this letter and return to me. Please make sure you fill out the form completely and legibly. Once the information is updated in our system, you will begin receiving all invoices via the choice you make below.

We look forward to you taking advantage of this service.					
Customer name:	Fax#:				
Contact name:	Phone#:				
Email Address:					
Please check appropriate box(s): Fax Email Need copies of invoices, packing lists and or bill of ladings Need invoices only Mail invoices only Mail invoices, packing lists and or bill of ladings					
Thank You,					

Tracy Lillie Northern Metal Fab, Inc. Accountant I

Email: tracy.lillie@nmfinc.com

Phone: 715.684.7417 Fax: 715.684.3639