



Vitracoat America, Inc.
2807 Marina Drive
Elkhart, IN 46514
office (574) 264-6090
fax (574) 264-2776
www.vitracoat.com

Dear Vitracoat Customer:

Thank you for giving us an opportunity to partner with your organization.

For all customers, we will need to have your federal tax identification number/W-9, and sales tax-exempt certificate if applicable. A blank W-9 is attached for your convenience and if we do not receive your sales tax-exempt certification then we will bill you for sales tax on your orders.

The quickest way to set up an account with us is to provide a completed credit card authorization and complete the first 4 sections of the credit application. You will find these forms attached. This card could be used in one of the following ways.

- Used until we have established open terms
- Authorized order by order for future orders
- Kept on file to be used for future orders

Credit card orders can often be processed on the same day that the completed credit card authorization form is submitted to Vitracoat. If you keep your credit card number with us, please note that it is kept in an encrypted software.

To be considered for open terms, please complete all sections of the credit application, as well as all bank reference authorization. It will be reviewed, and you will receive an additional letter with your opening credit limit.

Please send your completed forms to accounts.ap-ar@vitracoatamerica.com and your orders should be sent to orders@vitracoatamerica.com.

If you have any questions along the way, please do not hesitate to contact us.

Sincerely,

Pat Mullins, Accounts Receivable
pmullins@vitracoatamerica.com or 1-574-264-6090 4-1

Tasha Charlwood, Accounts Receivable
tcharlwood@vitracoatamerica.com or 1-574-264-6090 4-1

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.					
	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.		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
	<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	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____					Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____					<small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) See instructions.			Requester's name and address (optional)		
6 City, state, and ZIP code						
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											
				-							

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 ▶

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-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.



CREDIT APPLICATION

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Section 1: BILLING ADDRESS & TAXES

Legal Entity Name	Billing Address		
DBA	City	State	Zip code
Telephone	Fax		
Attached W-9? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
Attached Sales Tax Exemption Certificate? Yes <input type="checkbox"/> No <input type="checkbox"/>			
<i>If Sales Tax Exemption Certificate is not provided then State and Local taxes will be applied to your orders.</i>			

Section 2: SHIPPING ADDRESS

Check box if Shipping Address is same as your Billing Address

Address	City	State	Zip code
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Section 3: FREIGHT & SHIPPING INSTRUCTIONS

Check box if you would like to use our account and we add the charges to your invoices
 Complete the section below if you would preferred to use your carriers

Small Parcel Carrier	Your Acct #
Freight LTL Carrier	Your Acct #
Receiving Hours	Other Shipping Instructions

Section 4: CONTACT INFORMATION

AP Contact	AP email AP Phone
Purchasing Contact	Purchasing email Purchasing Phone
Controller Contact	Controller email Controller Phone

-----Stop Here if you would like to use Credit Cards only-----

Section 5: CREDIT

Estimated Monthly Purchases \$	Year Established
D&B # (optional)	Sic # (optional)
Check box for Ownership Type: Sole Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/>	
Name of Primary bank: <i>Please completed the Attached Bank Credit Release Authorization</i>	

Have you had any bankruptcies? Yes No

Explanation:

Would you like to pay by ACH? Yes No

Section 6: REFERENCES

Company #1:	Contact
Phone Number	Email
Company #2:	Contact
Phone Number	Email
Company #3:	Contact
Phone number	Email

CREDIT AGREEMENT

Any misrepresentation in this Agreement will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principles listed. In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed upon. In the event any third parties are employed to collect any outstanding monies owed by said business the undersigned agrees to pay reasonable collection costs, including attorney fees. Whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Print name	Signature
Title	Date



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Bank Credit Release Authorization

For the purpose of obtaining merchandise on credit, I authorize

Your Bank Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Account Number _____

To release credit information to:

As an inducement to grant credit, the undersigned agrees to the need for verification of all information on this agreement and authorizes and releases all banks, businesses and persons identified on this agreement to furnish any and all information requested by

_____ Vitracoat America, Inc _____ or its representative, by telephone or written correspondence.

Represented by _____

The undersigned warrants that the information is true and correct.

As an inducement to grant credit, the undersigned agrees to _____ Vitracoat America, Inc.

The right to obtain the credit history of the undersigned and authorizes the release of such information by signature here.

Signature _____ Printed Name _____

Title _____ Date _____



Credit Card Authorization

All fields must be completed to process your order.

If you are a new customer, then sections 1 - 4 must be completed on the Credit Application

Date form Completed:	
Customer Name:	
Keep on file or Single Use:	
Card Type:	
Card Number:	
Expiration Date:	
Security Code (back of card):	
Name on Card:	
Billing Address for Credit Card:	
Billing City, State:	
Billing Zip Code:	
Person Authorizing Transaction:	
Email for the Receipt:	
Notes:	

A 1% convenience fee will be charged on all credit card payments over \$2,000.

OFFICE USE ONLY:

Information Gathered by:	
Processed by:	
Date Processed:	

THIS DOCUMENT MUST BE SHREDDED IMMEDIATELY