Swagelok North Texas

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Texas Fluid Systems LLC dba Swagelok North Texas to make inquiries into the banking and business/trade references that you have supplied.

BUSINESS CONTACT INFORMATION

Company name:	**Date business commenced:**
Billing address: Street Address: ______ City: ______ State: ______ Zip:______	**Shipping Address (If different):** Street Address: ______ City: ______ State: ______ Zip:______
Taxable: ☐ No ☐ Yes **Tax Exempt #:**	**PO Required:** ☐ No ☐ Yes
Purchasing Contact Name:	**Accounts Payable Contact Name:**
Title: Phone:	Title: Phone:
E-mail: Fax:	E-mail: Fax:

INVOICE AND INQUIRY INFORMATION

Please send remittances to NorthTexas@Swagelok.com

Email address where Invoices should be sent:	**Email address where Inquiries/Statements should be sent:**

BUSINESS/TRADE REFERENCES

Minimum 3 successful credit references required

Company name:	Phone:
Street Address: ______	Fax:
City: ______ State: ______ Zip:______	E-mail:
Company name:	Phone:
Street Address: ______	Fax:
City: ______ State: ______ Zip:______	E-mail:
Company name:	Phone:
Street Address: ______	Fax:
City: ______ State: ______ Zip:______	E-mail:
Company name:	Phone:
Street Address: ______	Fax:
City: ______ State: ______ Zip:______	E-mail:
Company name:	Phone:
Street Address: ______	Fax:
City: ______ State: ______ Zip:______	E-mail:

SIGNATURES

Signature:		
Name:	Title:	Date:

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: ______________________________

Street address: ______________________________ City, State, ZIP code: ______________________________

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 sales or use taxes which may become due for failure to comply with the provisions of the Tax Code: Limited Sales, Excise, and Use Tax Act; Municipal Sales and Use Tax Act; Sales and Use Taxes for Special Purpose Taxing Authorities; County Sales and Use Tax Act; County Health Services Sales and Use Tax; The Texas Health and Safety Code; Special Provisions Relating to Hospital Districts, Emergency Services Districts, and Emergency Services Districts in counties with a population of 125,000 or less.

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

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.

Form **W-9** (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.

Print or type See Specific Instructions on page 2.

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification (required): ☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Exempt payee

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ ____________

☐ Other (see instructions) ▶

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code

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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number: ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Employer identification number: ___ ___ - ___ ___ ___ ___ ___ ___ ___

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).

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 on page 4.

Sign Here **Signature of U.S. person ▶** Please print and sign this form **Date ▶**

General Instructions

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

Purpose of Form

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
- 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.

Swagelok North Texas

505 Century Parkway, Ste. 100
Allen, TX. 75013
PH: 214-221-6000

RETURN / CANCELLATION POLICY

CONDITIONS

- All returns and cancellations must be approved by Swagelok North Texas and obtain an RMA prior to returning for credit and must be shipped prepaid unless otherwise authorized by Swagelok North Texas.
- Returns for evaluation in accordance with the Swagelok Limited Lifetime Warranty must follow the CAP process.
- All goods returned for credit must have been purchased from Swagelok North Texas.
- Special order items cannot be returned, this includes:
    - Hose and Tubing products cannot be cancelled or returned.
    - Products Custom Solution Assembled to Order (CSATO) cannot be cancelled or returned.
    - Factory special parts Assembled to Order (ATO) cannot be cancelled or returned.
    - Factory special parts Made to Order (MTO) cannot be cancelled or returned.
    - Factory special parts Engineered to Order (ETO) based upon customer specification cannot be cancelled or returned.
    - Non-stock MTS items and items ordered from third-party suppliers based upon customer specification cannot be cancelled or returned.
- All returned products are subject to inspection prior to acceptance. Swagelok North Texas will only accept parts that are new, unused, and remain in their original packaging. Returned products that have tarnishing, blemishes, dirt or any evidence of use or contamination will not be accepted.
- Any return request will be reviewed on a case-by-case basis prior to acceptance. In the event that we are unable to fulfill the return request, a Customer Support Representative will provide the details of the decision.

RESTOCKING

Restocking charges will be applied to all returns based upon the following:

- Product returned within 60 calendar days of invoice date will be subject to a re-stocking fee or $100 minimum fee, whichever is greater. Re-stocking fees will be communicated on RMA if return is approved.
- Products owned by the customer more than 60 days cannot be returned.

CREDIT NOTES

- All credit notes resulting from product returns can be applied to current account balance or future purchases – cash refunds will not be issued.
- Credit notes will expire one year from issue date.
- Credit notes will be applied as directed by the customer except in the following situations:
    1. If the invoice associated with returned products is unpaid, the resulting credit note will immediately be applied as payment toward the original purchase.
    2. Credit notes will automatically be applied to the oldest of any past due, unpaid invoices.