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HARBOR STEEL & SUPPLY CORPORATION

DISTRIBUTING FERROUS AND NON-FERROUS METAL TO INDUSTRY SINCE 1952 1115 E. BROADWAY MUSKEGON, MI 49444

PHONE (231)-739-7152 • (800)-858-4201 • FAX (231)-733-0544

APPLICATION FOR CREDIT From

Harbor Steel and Supply Corporation – Kentucky Operations

The following information is for the purpose of obtaining credit and is warranted to be true. I/we authorize Harbor Steel & Supply Corporation to investigate the references listed below pertaining to this credit application.

Date: Company name:				
D.B.A.:				
Street Address:				
City: State: Zip code:	DUNS#:			
Phone: Fax:	Email:			
Invoices: Emailed Mailed Billing Address if different	ent:			
Federal I.D. #:	Subject to sales tax:			
Type of sales tax exemption: Industrial Processing Resale	Other (describe):			
State: KY MI WV State Permit #:				
Business organization: Corporation Partnership Proprieto	rship LLC			
Number of years in business : Number of year	s in present management:			
-	ct concerning payments:			
Pho	one: Email			
Trade References				
Name Address/City/State	Contact Name Email			
1.				
2.				
<u>3.</u>				
4.				
Credit terms: Payment terms to be communicated upon notification of approval of application. The customer agrees to assume liability for any State Sales Taxes if assessed against Harbor Steel; agrees to pay all collection costs to collect past due accounts, including but not limited to legal fees and court costs, and agrees to pay finance charges on past due invoices at the rate of 18% per annum orthe legal rate of interest in the state of business, whichever is lower.				
*Signed:	*Date:			
*Printed name and title:				

When completed, please submit to Teresa Stevens at tstevens@harborsteel.com or via fax at 231-246-1690.

PERSONAL GUARANTEE

In consideration of credit which has been, or will be extended to the named company, the undersigned does unconditionally, personally, and individually guarantee to Harbor Steel & Supply Corporation the payment of any and all indebtedness that may be due now or which may become hereafter due, such amount to include attorney fees incurred in the enforcement and collection of said indebtedness as a result of this agreement. This guarantee shall be for the amount owing but not to exceed \$500,000.00 and this guarantee shall run until December 31, 2050.

Company name:	
*Signed:	*Date:
*Printed name:	*Home phone:
*Home address:	
*City: *State: *	*Zip:
*Driver's license number:	*Date of Birth:

^{*}Designates a required field

Revision: 1.00

Issue Date: 05/21/1996

HARBOR STEEL CUSTOMER PROFILE

CUSTOMER:	DATE:			
SHIP TO ADDRESS:	PHONE:			
	FAX:			
Pack Type:	Unload Type:			
☐ SKID ☐ BUNDLES ☐ BOXED ☐ WRAPPED ☐ SHRINK WRAPPED	☐ FORKLIFT SIDE ☐ FORKLIFT REAR ☐ OVERHEAD CRANE ☐ SHEET LIFTER ☐ HAND UNLOAD			
Max Skid Weight	Max BundleWgt			
Weight Capacity Receiving Hours	Receiving Days			
Receiving Lunch Hours	Receiving Manager			
Contact	Phone Number			
Delivery Call:				
Tolerances on Processing: Standard Warehouse tolerance +1/8" -0.0" If different, please specify				
Special Instruction: Please Specify				
Customer Instructions				
Warehouse Instructions				

Important—Certificate not valid unless completed.

RESALE CERTIFICATE

Check Appli	cable Block	•
Blanket		П

	Single Purchase
I hereby certify that	
Name of Business	Address
holds a valid Sales and Use Tax Permit, Account No.	_, issued pursuant to the sales and use tax law and is
engaged in the business of selling, leasing or renting, industrial process	sing or manufacturing the following:
I further certify that the tangible personal property, digital property enumerated in KRS 139.200(g)-(q) described herein which I shall purch Harbor Steel and Supply Corporation	
Name of Seller	Address
will be resold in the regular course of business, or leased or rented, as provided in KRS 139.470(9), in the manufacture or industrial processing will be resold. In the event any property or service purchased under this demonstration or display while holding it for sale, lease or rental in the required by law to report and pay the tax measured by the purchase price	of tangible personal property or digital property which certificate is used for any purpose other than retention, regular course of business, it is understood that I am
Under penalties of perjury, I swear or affirm that the information on this	certificate is true and correct as to every material matter.
Authorized Signature (Owner, Partner or Corporate Officer)	Title

CAUTION TO SELLER: Contractors or other persons registered under a consumer number in the 900,000 series may not issue a resale certificate for any purchase. Sellers accepting certificates from such persons will be held liable for the sales or use tax.

NOTE: Any person who makes improper use of this certificate is subject to such penalties as provided by law including the criminal

provisions of KRS 139.990(1).



DEPARTMENT OF REVENUE Frankfort, Kentucky 40620

Date



Streamlined Sales Tax Agreement Certificate of Exemption

Do not send this form to the Streamlined Sales Tax Governing Board. Send the completed form to the seller and keep a copy for your records.

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or the data elements required on the form) to a state that would otherwise be due tax on this sale.

The purchaser will be held liable for any tax and interest, and possible civil and criminal penalties imposed by the member state, if tŀ

	Check if you are attaching the Multistate Supplemental form.					
	If	not, enter the two-letter abbreviation for the	e state under who	ose laws you are claiming ex	xemption.	
	С	heck if this certificate is for a Single Purchas	e Certificate. En	ter the related invoice/purch	nase order#	
	A. Nai	me of purchaser				
	B. Bus	siness address		City	State	Zip code
	C. Pui	rchaser's tax ID number	State of Issue	Country of Issue		
Print or type	D. If n	o tax ID number, enter one of the following: FEIN				
intor	E. Dri	ver 's License Number/State Issued ID number			State of Issue	
₫	F. For	eign diplomat number				
	G. Nai	me of seller from whom you are purchasing, leasing	or renting			
	H. Sel	ler's address		City	State	Zip cod
Circle type of business	05 06 07 08 09	Finance and insurance Information, publishing and communications Manufacturing Mining Real estate Rental and leasing	15 16 17 18 19	Business services Professional services Education and health-care Nonprofit organization Government Not a business	e services	
nos		Retail trade on for exemption. Circle the letter that identifi		Other (explain) the exemption.		
reas	Α	Federal government (Department)		Agricultural Production #		
e or check rea for exemption	В	State or local government (Name)	I	Industrial production/man	-	
S es	С	Tribal government (Name)	J	Direct pay permit #		
o Fe	D	Foreign diplomat #	K	Direct Mail #		
	E	Charitable organization #	L	Other (Explain)		
e 우			M	Educational Organization	· #	
Circle or check reason for exemption	F	Religious organization #Resale #		Educational Organization	ι π	

Name of Purchaser		
State	Reason for exemption	Identification number (if required)
AR		
GA		
IA		
IN		_
KS		
KY		
MI		_
MN		
NC		_
ND		
NE		
NJ		
NV		
OH		
RI		
OK		
SD		
TN		
UT		
VT		
WA		
WI		
WV		
WY		
SSUTA Direct Mail pr	ovisions are not in effect for Tennessee.	
_	ember states will accept this certificate for t Mail provisions do not apply in these sta	exemption claims that are valid in their respective tes.
State	Reason for exemption	Identification number (if required)
XX		

Form ST-105

State Form 49065 (R6 / 12-22)

Indiana Department of Revenue

General Sales Tax Exemption Certificate

Indiana registered retail merchants and businesses located outside Indiana may use this certificate. The claimed exemption must be allowed by Indiana code. Exemption statutes of other states are not valid for purchases from Indiana vendors. **This exemption certificate can not be issued for the purchase of <u>Utilities, Vehicles, Watercraft, Aircraft, or Gasoline.</u> In addition, this exemption certificate may not be issued by a nonprofit organization. Purchaser must be registered with the Department of Revenue or the appropriate taxing authority of the purchaser's state of residence.**

Sales tax must be charged unless <u>all</u> information in each section is fully completed by the purchaser. Purchasers not able to provide all required information must pay the tax and may file a claim for refund (Form GA-110L) directly with the Department of Revenue. A valid certificate also serves as an exemption certificate for (1) county innkeeper's tax and (2) local food and beverage tax.

	Name of Purchaser:			
<u></u>	Business Address:	City:	State:	ZIP Code:
ıt on	Purchaser must provide minimum of one	e ID number below.*		
(print only)	Provide your Indiana Registered Retail I	Merchant's Certificate TID and LO	C Number as shown on you	ır Certificate.
n 1	TID Number (10 digits):	LOC Num	ber (3 digits):	
Section 1	If not registered with the Indiana DOR, p *See instructions on the reverse side			
	State ID Number:	State of Issu	ue:	
n 2	Name of Seller:			
Section	Address of Seller:			ZIP Code:
Section 3	Is this a blanket purchase exemption request or a single purchase exemption request? (check one) Description of items to be purchased:			,
Section 4				
Section 5	I hereby certify under the penalties of per exempt purpose pursuant to the State Gr watercraft, aircraft, or gasoline. I further a I confirm my understanding that misuse me personally and/or the business entity. Signature of Purchaser: Printed Name:	oss Retail Sales Tax Act, Indiana Co ttest that the property purchased is (either negligent or intentional), a v I represent to the imposition of ta	ode 6-2.5, and the item purc not being purchased by a no nd/or fraudulent use of this x, interest, and civil and/or Date:	hased is not a utility, vehicle, onprofit organization. certificate may subject both
	Printed Name:		I ITIE:	

Instructions for Completing Form ST-105

All five sections of the ST-105 must be completed or the exemption is not valid and the seller is responsible for the collection of the Indiana sales tax.

Section 1

- A) This section requires an identification number. In most cases this number will be an Indiana Department of Revenue issued Taxpayer Identification Number (TID see note below) used for Indiana sales and/or withholding tax reporting. If the purchaser is from another state and does not possess an Indiana TID Number, a resident state's business license, or State issued ID Number must be provided.
- B) Exceptions For a purchaser not possessing either an Indiana TID Number or another State ID Number, the following may be used in lieu of this requirement.

Federal Government - place your FID Number in the State ID Number space.

Farmer – place your SSN or FID Number in the State ID Number space.

Public transportation haulers operating under another motor carrier authority, or with a contract as a school bus operator, must indicate their SSN or FID Number in the State ID Number space.

Section 2

A) Enter the seller's name and address.

Section 3

- A) Check a box to indicate if this is a single purchase or blanket exemption.
- B) Describe product being purchased.

Section 4

- A) Purchaser must check the reason for exemption.
- B) Purchaser must be able to provide additional information if requested.

Section 5

- A) Purchaser must sign and date the form.
- B) Printed name and title of signer must be shown.

Note: The Indiana Taxpayer Identification Number (TID) is a ten digit number followed by a three digit LOC Number. The TID is also known as the following:

- a) Registered Retail Merchant Certificate
- b) Tax Exempt Identification Number
- c) Sales Tax Identification Number
- d) Withholding Tax Identification Number

The Registered Retail Merchant Certificate issued by the Indiana Department of Revenue shows the TID (10 digits) and the LOC (3 digits) at the top right of the certificate.

tax.ohio.gov

Sales and Use Tax Blanket Exemption Certificate

The purchaser hereby claims exception or exemption on all purchases of tangible personal property and selected services made under this certificate from:

	(Vendor's name)	
and certifies that the claim is based up or both, as shown hereon:	oon the purchaser's proposed use of the iter	ns or services, the activity of the purchase
Purchaser mu	st state a valid reason for claiming excep	otion or exemption.
	Purchaser's name	
	Purchaser's type of business	
	Street address	
	City, state, ZIP code	
	Signature	Title
	Date signed	
	Vendor's license number, if any	

Vendors of motor vehicles, titled watercraft and titled outboard motors may use this certificate to purchase these items under the "resale" exception. Otherwise, purchaser must comply with either rule 5703-9-10 or 5703-9-25 of the Administrative Code. This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with rule 5703-9-14 of the Administrative Code.