

STEINER ELECTRIC COMPANY

Corporate Headquarters: 1200 N. Arlington Heights Road, Suite 400, Itasca, IL, 60143 Date 847-228-0400 • Fax 847-956-3175 • www.steinerelectric.com • credit@stnr.com

Credit	Ap	plic	catior	ĺ

Steiner Location

	L	Fredit Ad	piication		ainer Assessment Managar
		-	-		einer Account Manager
Type of Business:	strial OEM	Contractor	Commercial	Other	
Charge / Bill To:			Ship To:		
Company Name:					
Address:			Address:		
City:		•	-		State: Zip:
Phone:					Fax:
E-Mail Address:			E-Mail Address:		
E-Mail Address where Statements and	I Invoices will be ser	nt:			
Parent Company, if Applicable (name a	and address):				
			SIC Code:	D	& B Number:
Special Billing or Shipping Instructions	8:				Additional "Ship To" locations attache
Principal Owners or Stockholders	s and Officers 🗳	please attach a co	py of current drivers	license for each o	of the following individuals
Name Title	Home Add	ress		Home Phone	Social Security Number
Name Title	Home Add	ress		Home Phone	Social Security Number
Credit References					
Company		Phor	ne		Fax
Company		Phor	ne		Fax
Company		Phor	ne		Fax
Company legally established as a: \Box	Corporation	eneral Partnership	Limited Partnership	Non-Profit Org.	. 🔲 Limited Liability Co. (LLC)
□ Sole proprietorship doing business	under an assumed	name			_ State in which organized
Company Taxpayer Identification no	D	Date C	Company Founded	🖵 Fii	nancial Statement Attached
Please attach a copy of the Articles the Secretary of State or the Assun	•			f Limited Liability Co	ompany that were filed with
Partial List of Authorized Buyers:			-		
Accounts Payable Contact:			Phone No		
□ Purchases are Tax Exempt? [] No []	Yes VALID TAX EXEMP	FION CERTIFICATE ATTAC	HED State Sales Tax ID Nu	ımber:	State of:
If we do not have a valid Tax Exemption Certific missing or, if it is a Blanket Certificate, if it was that the purchase was a taxable purchase, you or Local Department of Revenue.	issued more than three	years ago. If you make a	tax-free purchase from us an	nd it is later determined,	by a State or Local Department of Revenue
www	Total Co. Ani	nual Sales \$	No. of Employee	s Est. Annual	Purchases with Steiner \$
Bank Information ————					
Bank Name	Address			City	State Zip Code
Bank Representative	(Direct Pl)		Account No. (ar include a	a copy of a blank voided check)
					· · · · · · · · · · · · · · · · · · ·
American Banking Association (ABA) Number	Do you	have a line of credit? 🔲 Y	es UNO Credit line: \$	Available am	ount: <u>\$</u> As of:
Confirmation of Information Accu	uracy and Releas	e of Authority to V	/erify		
The applicant certifies that all of the information on bot that the information included in this credit application wi credit reporting agencies in making a determination a organizations regarding the applicant's personal credit the applicant. The applicant agrees to comply with all a Steiner and on Steiner's website at www.steinerelectric, with all reasonable costs of collection (including attorn	h sides of this credit applicat ill be relied upon by Steiner B and to assist Steiner in esta for the purpose of investigatii oplicable terms, conditions au com, and which are herein ir	tion is true and correct and do Electric Company ("Steiner") in ablishing a line of credit. The ng the applicant's business an d provisions of Steiner's Term ncorporated by reference), incl	bes not omit any material fact nece or determining the amount and com- applicant authorizes Steiner to r d its eligibility for commercial cred is and Conditions of Sale, as ame luding without limitation to make fu	ditions of credit to be extend request and receive credit r it. The applicant further cons nded from time to time by St ill and timely payments and t	ied. Steiner may also utilize other suppliers of credi reports from credit bureaus and other credit serv sents to any investigation into the credit-worthiness teiner (a copy of which is available upon request fro to pay 1.5% per month on past due invoices, together to pay 1.5% per month on past due invoices, together

applicant's obligation shall be governed by, and construed in accordance with, the internal laws of the State of Illinois, without regard to its principles of conflicts of law. The applicant (a) hereby irrevocably agrees that all disputes arising out of or relating to collections that cannot be resolved by the parties shall be resolved only by the State or Federal courts located in Cook Courty, Illinois, (b) hereby irrevocably consents and submits to the exclusive jurisdiction and venue of such State and Federal courts, and (c) waives any objection or right to contest said jurisdiction or venue or claim that any such action or proceeding was brought in an inconvenient court. The applicant further waives any and all rights to a trial by jury in any action, proceeding or counterclaim brought with respect to any matter arising out of or relating to collections.

Authorized Signature (Princip	al / Owner / Officer)	P	rint Name		Title	Date	
						cont	inued on back
CURRENT REVISION DATE ORIGINAL ISSUE DATE	01/20/12 02/23/09	FACILITY ID ALL	TYPE SPF	SEC 802	SUP 01	REPL/REV Rev. 3	PAGE 1 of 2

STEINER	Customer Address	Account #	Date	
edit Application Continued				
de 2	City	State	Steiner Account Ma	
Have any of the owners previously o	wned a business? 🛛 Yes 🗅 No If y	ves, what was the com	pany name and what	happened to it?
List major customers, and average of	lays to pay:			
	ces I)			
II)	Annual Purchases \$ III) _		Annual Pure	chases \$
If customer is a contractor:		_	_	
	e: Caresidential Commercial Care		-	
	Markets: Cresidential Commerce		data com. 🖵 other	
-	nt • Goal wi In working in the field 🔲 2) running t		usinges D 2) both	
, , , , , , , , , , , , , , , , , , , ,	eir trade?	•	,	
	with general contractors			
	Average Days to Receive Payment	Number of Jobs	Overall Relationship	Number of Times a
General Contractors	After Submitting Pay Request	Within Past 5 Years	1-Poor to 5-Excellent	Job was Liened
Comments				
	Iling, collecting and payables?			
G) Is one person responsible for bi H) Does contractor do tax exempt I) Will job accounts will be setup? Finer Management Review – For Interna	Iling, collecting and payables? Yes jobs? Yes No If Yes, VALID TAX Yes No If no, why not? I Use Only	NO Name	MUST BE PROVIDED AT T	
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