

Please send completed application to ppe@dellcorning.com

| RFP | Date: | Cust #: | | | | |
|--|--------------------------|---------------------------------------|--|--|--|--|
| Company Name: | | | | | | |
| Billing Address: | Shipping Address City | State Zip | | | | |
| Telephone: | Fax: PO Required: | | | | | |
| Preferred Method of Invoicing: Email to: | | (or mark here if US Mail Preferred □) | | | | |
| Receiving hours: | LiftGate Needed: | Appt: | | | | |
| Type of Business: Corporation LLC Partnership Private Entity Federal Tax ID: | | | | | | |
| Sales Tax Exempt Yes 🗌 Enter Sales Tax ID: | | or No 🗌 Tax all items | | | | |
| Owner/Partners: Name: | SS# | Phone | | | | |

I, an Officer of the applying company, hereby certify the information provided to be true and correct. The applying company agrees to financial responsibility, ability and willingness to pay invoices in accordance with Dell Corning Corporation terms and conditions. In case of default of payment, the applying company agrees to pay all collection and attorney fees and late charges of 1 ½% applied to all past due accounts up to (18% per annum).

ORDERS CAN NOT BE PROCESSED WITHOUT THIS COMPLETED PAGE.

| Company Name | |
|--------------|---|
| | |
| Signature | |
| | |
| Title | |
| | |
| Date | |
| | |
| | Please note that our remit to address is: |
| | Doll Corporation |

lease note that our remit to address is Dell Corning Corporation 575 John Dodd Road Spartanburg, SC 29303



<u>Vendor References</u>: Please provide references with major sources OR Mark if attaching Own Credit Reference sheet:

| Company Name: | | Phone: | | Fax: |
|-----------------|----------|--------|--------|------|
| Address: | Contact: | | Email: | |
| | | | | |
| Company Name: | | Phone: | | Fax: |
| Address: | Contact: | | Email: | |
| Company Name: | | Phone: | | Fax: |
| Address: | Contact: | | Email: | |
| Bank Reference: | | | | |
| Bank Name: | | Phone: | | Fax: |
| Address: | Contact: | | Email: | |
| Account # | | | | |

Security Interest:

By signing this credit application/agreement, the individual executing this Application above on behalf of Buyer, individually and personally, represents to Dell Corning Corporation that; 1) he/she is authorized to execute this Application on behalf of Buyer; 2) Applicant further certifies that Applicant is solvent and has sufficient working capital to meet obligations as they become due; 3) the information set forth in this Application is accurate and complete; 4) Buyer agrees that the prevailing party in any proceeding to enforce this Guarantee or to resolve a dispute with Dell Corning Corporation will be entitled to recover it's cost, including but not limited to: attorneys fees, collection agency fee, from the other party; and 5) Buyer agrees to pay interest on any unpaid purchases, beginning 30 days after the payment due date, at the rate of 1.5% per month; 18% per annum, or the maximum judicial rate, whichever is less. Buyer also agrees to pay \$25.00 for each check issued by Buyer to Dell Corning Corporation which is returned to Dell Corning Corporation whic

In signing this Application, Buyer agrees to all the above and hereby grants permission for credit information to be verified by company(s) and financial institutions that the Buyer has specified on this document and others that Dell Corning Corporation, becomes aware of during the credit review process and from time to time. The undersigned also understands that Dell Corning Corporation, will retain this Application, whether or not it is approved, and that Dell Corning Corporation, will consider this Application as a continuing statement of the undersigned financial position and situation until notified in writing by certified mail by the Buyer.

In order for Dell Corning Corporation, to sell and continue to sell product or provide service to Buyer, Buyer hereby represents and warrants that it is solvent and that it pays its obligations as they become due. The proceeding representation and warranty will be deemed to be repeated in each purchase by Buyer.

Faxed documents will be deemed and accepted as original. No oral agreements will be accepted. Any terms and conditions inconsistent with those stated herein, which may appear on your purchase order, or any other documents comprising an order from you will be void.



If any purchased product will be for resale and/or non-taxed, this form must be filled out and Returned with Credit Application.

| FIRM NAME | | | | | |
|--|----------------------------|---|-------------------------|--|--|
| I HEREBY CERT | TIFY, that (Choose One) | | | | |
| I hold Valid Se of this form) | eller's Permit Number: | | (You must fill out rest | | |
| | | OR | | | |
| I should be Tax | xed for all Product I Purc | hase: 🗌 (No need to fill out r | est of form) | | |
| Issued pursuar | nt to the Sales and Use t | ax Law; that I am engaged in t | he business of selling: | | |
| and that the ta | C | y described herein which I sha I Corning Corporation | ll purchase from: | | |
| will be resold by me in the form of tangible person property; PROVIDED, however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay for the tax, measured by the purchase price of such property. | | | | | |
| Description of | property to be purchas | ed: I | | | |
| | | | | | |
| Dated: | Signature: | Title: | | | |
| At: | Phone: | Fax: | | | |
| Address: | | | | | |
| | | | | | |

Please note that our <u>remit to address is</u>: Dell Corning Corporation 575 John Dodd Road Spartanburg, SC 29303 Phone: (864) 578-5552 <u>ppe@dellcorning.com</u>

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