This application must be completed to place orders on Net Terms.

Orders will not be processed until application is approved.

General	Information

Date:	Contact Name:
Company Name:	Title:
Address:	Telephone:
Suite / Apt:	Fax:
City:	Email:
State / Province:	Type of Enterprise
Postal Code:	Corporation: (if yes in what state)
Country:	Partnership: □
Company Tax ID / Principal SSN:	Sole Proprietor: □
Year Established:	Other:
Company Type	
Display Manufacturer / Framer / Gallery Owner:	
Printing / Imaging / Sign Company: \Box	
Distributor / Wholesaler: \square	
Other: (Please Specify):	
Brief Company Description	

Billing Information \Box (If it is the same please check he	ere and you can leave below blank)
Contact Name:	Postal Code:
Title:	Country:
Address:	Telephone:
Suite / Apt:	Fax:
City:	Email:
State / Province:	
Is a purchase order number required? Yes \(\square \) No \(\square \) ***We have to collect tax in many states. Please include any we do not need to charge you tax.	y tax exempt certificates you may have when sending back this form so
Bank References	
Bank Name:	Address:
Account Number:	Suite / Apt:
Contact Name:	City:
Title:	State / Province:
Telephone:	Postal Code:
Fax:	Country:

Trade Reference (1) Company Name: _____ Contact Name: _____ Suite / Apt: Title: _____ City: _____ Telephone: _____ State / Province: _____ Postal Code: _____ Email: _____ Country: _____ **Trade Reference (2)** Company Name: _____ Contact Name: Suite / Apt: _____ Title: ______ City: Telephone: _____ State / Province: _____ Postal Code: _____ Email: Country: **Trade Reference (3)** Company Name: _____ Address: Contact Name: Suite / Apt: Title: ______ City: _____

State / Province:

Country: _____

Postal Code: _____

Telephone:

Email: _____

This credit application is submitted by the Applicant to Access Display Group Inc. for the purpose of acquiring net terms with Access Display Group Inc. The Applicant acknowledges and agrees that Access Display Group Inc.'s review of this credit application does not ensure that the Applicant will be given Net Terms. Access Display Group Inc. reserves the right to accept or reject any application submitted, at its sole discretion. THIS APPLICATION IS ONLY EFFECTIVE AND BINDING UPON ACCESS DISPLAY GROUP INC. APPROVED CONFIRMATION OF THE APPLICANT. FAILURE TO COMPLETE ALL SECTIONS OF THIS CREDIT APPLICATION AS REQUIRED WILL RENDER THIS APPLICATION INADMISSABLE. Applicant acknowledges and agrees that participation in the Net Terms program is at-will and subject to Access Display Group Inc.'s right to revoke or terminate status, with or without cause, at any time. Applicant expressly acknowledges and agrees that the termination provisions provided herein are reasonable, and agrees not to contest or otherwise challenge such provisions, or to claim damages as a result of termination by Access Display Group Inc.

BY SIGNING BELOW, THE APPLICANT REPRESENTS AND WARRANTS TO ACCESS DISPLAY GROUP INC. THAT THE INFORMATION PROVIDED TO ACCESS DISPLAY GROUP INC. IS TRUE AND ACCURATE, AND AGREES THAT DURING THE TERM OF ITS STATUS, IT SHALL PROMPTLY PROVIDE ACCESS DISPLAY GROUP INC WITH DETAILS REGARDING ANY MODIFICATIONS OR CHANGES TO SUCH INFORMATION. IN THE EVENT THAT SUCH INFORMATION IS DETERMINED TO BE INACCURATE, ACCESS DISPLAY GROUP INC. MAY IMMEDIATELY TERMINATE APPLICANT'S STATUS. APPLICANT SHALL BE LIABLE TO FULLY INDEMNIFY ACCESS DISPLAY GROUP INC. FOR ANY DAMAGES OR COSTS INCURRED BY ACCESS DISPLAY GROUP INC. AND RESULTING FROM OR AS A RESULT OF THE PROVISION OF SUCH INACCURATE INFORMATION BY APPLICANT.

Print: Name:	
Title:	
Signature:	
Signature:	
Date:	

Form **W-9** (Rev. October 2018)

(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; of Access Display Group, Inc.	to not leave this line blank.											
	2 Business name/disregarded entity name, if different from above		7.										
	DBA: SwingFrame / Displays4Sale												
page 3.	3 Check appropriate box for federal tax classification of the person whose nat following seven boxes.	x for federal tax classification of the person whose name is entered on line 1. Check only one of the					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
no st	☐ Individual/sole proprietor or ☐ C Corporation ☑ S Corporation single-member LLC	n Partnership	☐ Trust/e	state		Exempt payee code (if any)							
10	Limited liability company. Enter the tax classification (C=C corporation, S	S=S corporation, P=Partners	hip) ▶										
Specific Instructions on page 3.	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.						code (if any)						
5	☐ Other (see instructions) ▶	instructions) ▶			(Ap	plies	to accou	nts n	naintain	ed ou	tside	the U.S.	
જ	5 Address (number, street, and apt. or suite no.) See instructions.		Requester's	name	e and	add	ress (d	pti	onal)				
as I	151 South Main Street												
S	6 City, state, and ZIP code												
	Freeport, New York 11520												
-	7 List account number(s) here (optional)							_			-		
- 1	List account number(s) here (optional)												
Part	Taxpayer Identification Number (TIN)				Т								
ter y	our TIN in the appropriate box. The TIN provided must match the nat	me given on line 1 to avo	id So	cial s	ecuri	ty n	umbe	r					
	withholding. For individuals, this is generally your social security nu		ra										
	t alien, sole proprietor, or disregarded entity, see the instructions for					-			-			- 1	
, lat	, it is your employer identification number (EIN). If you do not have a	number, see now to get	or			- 1		_	_	_		_	
	f the account is in more than one name, see the instructions for line	Also see What Name a	<u> </u>	nplov	er ide	ntif	ication	n nı	ımbe	r			
	r To Give the Requester for guidelines on whose number to enter.	1. Also see What Ivallie a	110	l l	<u>г</u>		1		T	_		=	
,,,,,	The are the requester for galactimes on three raines to onte.		1	1	-	3	1	1	8	3	5	2	
	O-Aldis - Alson		- V										
art													
ider	penalties of perjury, I certify that:												
l am Serv	number shown on this form is my correct taxpayer identification num not subject to backup withholding because: (a) I am exempt from ba ice (IRS) that I am subject to backup withholding as a result of a failuinger subject to backup withholding; and	ckup withholding, or (b)	have not	been	notif	fied	by th	e Ir	ntern				
am	a U.S. citizen or other U.S. person (defined below); and												
The I	FATCA code(s) entered on this form (if any) indicating that I am exem	npt from FATCA reporting	is correct										
u hav quisit ner th	ation instructions. You must cross out item 2 above if you have been refailed to report all interest and dividends on your tax return. For real extension or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the confification,	state transactions, item 2 of tions to an individual retire	does not apment arran	oply. geme	For m	nort	gage i	nte	rest perally	paid , pa	l, yme	ents	
gn ere	Signature of U.S. person ▶	Date ▶ 1/1/2019											
ien	eral Instructions	• Form 1099-DIV (div funds)	idends, inc	cludir	ng the	ose	from	sto	cks	or n	nutu	al	
ction	n references are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)											
ated	ture developments. For the latest information about developments ated to Form W-9 and its instructions, such as legislation enacted transactions.		rm 1099-B (stock or mutual fund sales and certain other sactions by brokers)										
	ey were published, go to www.irs.gov/FormW9.	• Form 1099-S (proce	Tec. 780	real e	state	e tra	ansac	tior	ns)				
urpose of Form • Form 1099-K (merc		hant card	and t	hird	part	y net	wo	rk tra	nsa	ectio	ns)		
n individual or entity (Form W-9 requester) who is required to file an formation return with the IRS must obtain your correct taxpayer entification number (TIN) which may be your social security number SN), individual taxpayer identification number (ITIN), adoption xpayer identification number (ATIN), or employer identification number (ATIN), to report on an information return the amount paid to you, or other		 Form 1098 (home n 1098-T (tuition) 	nortgage ir	ntere	st), 10	098	-E (st	ude	ent lo	an	inte	rest),	
		 Form 1099-C (canc 	eled debt)										
		• Form 1099-A (acqui	sition or al	bando	onme	nt c	of sec	ure	d pro	pe	ty)		
		Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.											
eturns include, but are not limited to, the following. Form 1099-INT (interest earned or paid) If you do not re be subject to be later.													