



14325 Alondra Blvd, La Mirada, CA 90638 | Phone: 714.521.9171 | FAX: 714.521.9173 | www.envoycabinetry.com

(CREDIT APPLICATION 1 OF 4)

Company Name/DBA:			Envoy Sales Representative:	Date:
Address:			Corporation	Partnership
City:	State:	Zip:	Proprietorship	LLC
Phone:	Fax:	State of Organization:	Date of Formation:	

Current Shareholders, Sole Proprietor, Partners or Members Information: TAX ID OR SS#: _____

NAME	TITLE	HOME ADDRESS and PHONE NUMBER
_____	_____	_____
_____	_____	_____
_____	_____	_____

Billing information same as above address? YES NO If No, please fill out information below.

Billing Address: _____

Resale Exemption Certificate

We are in the business of wholesaling, retailing or manufacturing. The cabinetry your firm will be providing is for wholesale, resale, ingredients or components of a new product to be resold in the normal course of our business and should not be charged sales tax.

Our resale number is _____ and a copy of our Resale Exception Certificate is included. We further certify that if any property so purchased tax free is used or consumed by us or otherwise becomes subject to sales or use tax, we will hold Envoy Cabinetry harmless from such tax and timely pay the tax due directly to the proper taxing authority when state law so provides or inform Envoy Cabinetry of added tax billing, prior to shipment. This certificate shall be part of each order which we may hereafter submit to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by the city or state. Note: if tax should be charged, do not complete this section.

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, undersigned agrees to and irrevocably binds his or her company identified above (the "Company") to the following terms. The undersigned hereby certifies that above information and the information on each additional page of this application is provided for the purpose of obtaining credit and is correct in all respects. The Company hereby authorizes Envoy Cabinetry to contact any references and obtain credit reports concerning the Company. ALL INVOICES NOT PAID WITHIN THE TERMS SUBSEQUENTLY APPROVED WILL BE SUBJECT TO A FINANCE CHARGE. THE FINANCE CHARGE IS COMPUTED BY A PERIODIC RATE AT THE LOWER OF 1.25% PER MONTH (WHICH IS AN ANNUAL PERCENTAGE RATE OF 15%) OR THE MAXIMUM AMOUNT ALLOWED BY APPLICABLE LAW APPLIED TO THE COMPANY'S ADJUSTED BALANCE. Envoy Cabinetry shall be entitled to reimbursement of any costs of enforcing this agreement, including reasonable attorneys' fees, whether or not suit is commenced. The undersigned and the Company fully understand the above credit terms and agree to pay promptly all amounts owed. The domestic laws of the State of California, without regard to conflicts of laws principles, will govern all questions concerning the construction, validity, interpretation and enforceability of this agreement and the performance of the obligations imposed by this agreement. The Company agrees that any legal proceeding instituted hereunder may be brought in a state or federal court of competent jurisdiction located in Northern Orange County, California and the Company hereby submits to personal jurisdiction therein and irrevocably waives any objection as to venue therein, and further agrees not to plead or claim in any such court that any such proceeding has been brought in an inconvenient forum. The Company authorizes Envoy Cabinetry to fax it any information and/or advertising so that Envoy Cabinetry remains in compliance with state and federal regulation, including the Telephone Consumer Protection Act. The undersigned individually warrants that he or she has the authority to bind the Company to the terms hereof by signing below and that this is a binding agreement of the Company upon such signature. The undersigned agrees to promptly notify Envoy Cabinetry in writing in the event of a change in the Company's name, a sale of any substantial portion of the Company's properties and assets, or a direct or indirect change in the beneficial owners of the Company.

Signature: _____ Title: _____ Date: _____



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(CREDIT APPLICATION 2 OF 4)

PLEASE CHECK BOX IF YOU WOULD LIKE 50/50 BILLING:

YES, Please skip references and bill us 50% upon order acknowledgment and 50% upon date product ships.

BANK REFERENCE:

Bank Name: _____ Fax Number: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Address: _____

CREDIT REFERENCES:

#1 Company Name _____ Fax Number: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Address: _____

#2 Company Name _____ Fax Number: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Address: _____

#3 Company Name _____ Fax Number: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Address: _____

#4 Company Name _____ Fax Number: _____
Contact Name: _____ Phone Number: _____
Account Number: _____ Address: _____



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(CREDIT APPLICATION 3 OF 4)

INDIVIDUAL PERSONAL GUARANTY

If you are sole owner of the Company, complete this Individual Personal Guaranty:

I, for and in consideration of Envoy Cabinetry ("You") extending credit at my request to (company name) _____ (herein referred to as the "Company"), hereby personally guaranty the payment to You of any and all obligations of the Company and I hereby agree to pay to You on demand any sum which may become due to You by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit hereby guaranteed. I agree to pay any costs of enforcing this guaranty, including reasonable attorneys' fees. The domestic law of the State of California, without regard to conflicts of laws principles, will govern all questions concerning the construction, validity, interpretation and enforceability of this guaranty and the performance of the obligations imposed by this guaranty. I agree that any legal proceeding instituted hereunder may be brought in a state or federal court of competent jurisdiction located in Northern Orange County, California and hereby submit to personal jurisdiction therein and irrevocably waive any objection as to venue therein, and further agree not to plead or claim in any such court that any such proceeding has been brought in an inconvenient forum. I hereby authorize Envoy Cabinetry to obtain my consumer credit reports from any consumer credit reporting agency, including, but not limited to, TransUnion, Equifax and Experian.

Signature: _____ Address: _____
Printed Name: _____
Date: _____

JOINT PERSONAL GUARANTY

If your spouse or another person or persons are officers or owners of the Company, complete this Joint Personal Guaranty:

We, for and in consideration of Envoy Cabinetry ("You") extending credit at my request to (company name) _____ (herein referred to as the "Company"), hereby jointly and severally personally guaranty the payment to You of any and all obligations of the Company and we hereby agree to pay to you on demand any sum which may become due to You by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. We hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit hereby guaranteed. We agree to pay any costs of enforcing this guaranty, including reasonable attorneys' fees. The domestic law of the State of California, without regard to conflicts of laws principles, will govern all questions concerning the construction, validity, interpretation and enforceability of this guaranty and the performance of the obligations imposed by this guaranty. We agree that any legal proceeding instituted hereunder may be brought in a state or federal court of competent jurisdiction located in Northern Orange County, California and hereby submit to personal jurisdiction therein and irrevocably waive any objection as to venue therein, and further agree not to plead or claim in any such court that any such proceeding has been brought in an inconvenient forum. We hereby authorized Envoy Cabinetry to obtain our respective consumer credit reports from any consumer credit reporting agency, including, but not limited to, TransUnion, Equifax and Experian.

Signature: _____ Signature: _____
Printed Name: _____ Printed Name: _____
Address: _____ Address: _____
Date: _____ Date: _____

ENVOY CABINETRY

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(CREDIT APPLICATION 4 OF 4)

DEALER INFORMATION

Company Name:			Phone:
(Store #1) Address:			Fax:
City:	State:	Zip:	Email (for Order Confirmation):
Primary Business Contact: Name: _____ Email: _____		Accounts Payable Contact: Name: _____ Email: _____	
Showroom size (in SQF):	Number of existing displays:	Existing lines of cabinet carried at this location: _____ _____	
How many sales persons at this location:		Annual sales at this location in the past 12 months:	
How many Envoy Cabinetry displays are you planning for this location?		Cabinetry Design system used: 2020 Prokitchen Other	
Estimated NET sales for Envoy Cabinetry for the next 12 months:		Is the address on this page also the delivery address? YES NO If NO, please complete information below.	
If more than 1 store location please fill in address below. If more than 3 store locations please fill out additional sheet and send in with credit application.		Is this a taxable account? YES NO If NO, please complete the Resale Certificate (next page).	
(Store #2) Address:			
(Store #3) Address:			

DELIVERY INFORMATION

Company Name:		Contact Name:	Phone:
Address:			Fax:
City:	State:	Zip:	Email:

California Resale Certificate

I HEREBY CERTIFY:

1. I hold valid seller's permit number: _____

2. I am engaged in the business of selling the following type of tangible personal property:

3. This certificate is for the purchase from _____ of the item(s) I have listed in paragraph 5 below. [Vendor's name]

4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.

5. Description of property to be purchased for resale:

6. I have read and understand the following:

For Your Information: A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

NAME OF PURCHASER

SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZED REPRESENTATIVE



PRINTED NAME OF PERSON SIGNING

TITLE

ADDRESS OF PURCHASER

TELEPHONE NUMBER

()

DATE

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: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	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.

Social security number									

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

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), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

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, payments made to you in settlement of payment card and third party network transactions, 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, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and 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 under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 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 section 1446 withholding on your share of partnership income.