



**GSW**<sup>®</sup>  
www.GSW-USA.com

4177 Rowland Ave #B  
El Monte, CA 91731

Tel: 626-291-5599, 800-897-5999

Fax: 626-286-0166, 866-499-3088

Email: [account@gsw-usa.com](mailto:account@gsw-usa.com)

*An International Manufacturing Distributor, Restaurant Equipment & Supplies*

## Confidential Credit Application

### Fax Cover Sheet

**Instruction:**

For better readability, **please type your contents using computers into the PDF forms.**  
Then print, sign and fax them to GSW.

**Attention: GSW Account Credit Department**

➔ Please handle as company's most confidential material!

From

Company: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Total Pages:** \_\_\_\_\_ (including this cover sheet)

**Contents Check List:**

Credit Application Form

Payment Agreement & Personal Guaranty

Bank Account Credit Verification Form

2<sup>nd</sup> Bank Account Credit Verification Form (if necessary)

Copy of State Resale Permit (if applicable)

Others: \_\_\_\_\_

**Comment:**



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## Confidential Credit Application

Customer warrants that the following information is accurate and complete: (Attach additional sheets as needed)

**Business Information** \* Please complete all \* **GSW Sales Rep:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Business Name: \_\_\_\_\_ Corp / LLC ID: \_\_\_\_\_

DBA: \_\_\_\_\_ Federal Tax ID/SSN: \_\_\_\_\_

Legal Name of Principals: \_\_\_\_\_ Resale Permit #: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Shipping Address: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_ Web Site: \_\_\_\_\_

Account Payable Contact Person: \_\_\_\_\_ Person to Authorize Order: \_\_\_\_\_

In Business since: \_\_\_\_\_ As a Corporation LLC Partnership Sole Proprietorship \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Estimated Annual Sales: US\$ \_\_\_\_\_ Credit Limit Desired: US\$ \_\_\_\_\_ Term: \_\_\_\_\_ days

**Finance References** (Bank / Lease) \* Complete the Bank Account Credit Verification is required, see next pages \*

Bank Name: \_\_\_\_\_ Account #: \_\_\_\_\_ Tel: \_\_\_\_\_

Bank Name: \_\_\_\_\_ Account #: \_\_\_\_\_ Tel: \_\_\_\_\_

### **Trade References** (List 3 major suppliers of your annual purchases)

Supplier: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Supplier: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Supplier: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

### **Officer / Owner Information**

Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

Home Address: \_\_\_\_\_ Tel: \_\_\_\_\_ SSN: \_\_\_\_\_

\_\_\_\_\_ Driver Lic.#: \_\_\_\_\_ State: \_\_\_\_\_

Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

Home Address: \_\_\_\_\_ Tel: \_\_\_\_\_ SSN: \_\_\_\_\_

\_\_\_\_\_ Driver Lic.#: \_\_\_\_\_ State: \_\_\_\_\_

### **Authorization** (Must be signed)

By my signature, I hereby authorize and give permission to **GSW** to run a full investigation of our credit history, including, but not limited to obtaining a consumer credit report. I also authorize **GSW** to contact the listed references and hereby give permission to those references to release information about our credit experience with them.

\*\*\*\*\* **IN THE EVENT ALL TRANSACTIONS ARE SUBJECT TO COLLECTION, IT WILL BE SUBJECT TO CALIFORNIA JURISDICTION.** \*\*\*\*\*

\*\*\*\*\* **All transactions are subject to UCC1 filing, the governing law shall be the State of California.** \*\*\*\*\*

Officer Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## PAYMENT AGREEMENT

We agree to pay all bills within the stated term of sales. We agree to pay a service charge of \$45.00 for any checks returned from our bank unpaid for any reason.

We agree not to transfer or assign this agreement without the prior written consent of GSW. We agree to give written notice to GSW prior to the sale or transfer of all or substantially all of the stocks or assets of our business; if we fail to do so, we shall remain fully liable for any unpaid merchandise received by the buyer or transferee of the business.

We also agree that all shipments are to be paid by COD or cashier's check until credit approval. All 30 days past due invoice are subject to a 10% late fee charge from unpaid invoice amount.

In the event all transactions are subject to collection, it will be subject to California jurisdiction. All transactions are subject to UCC1 filing, the governing law shall be the State of California.

Company Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## INDIVIDUAL PERSONAL GUARANTY

I, the undersigned, for and in consideration of your extending credit to the business entity identified in the above terms agreement as the "Purchaser", personally guarantee prompt payment of any obligation of the Company to GSW (including, but not limited to, all interest and charges), whether now existing or hereinafter incurred, and I further agree to bind myself to pay on demand any sum which is due by the Company to GSW whenever the Company fails to pay the same. It is understood that this guaranty shall be an absolute, continuing and irrevocable guaranty for such indebtedness of the Company.

I expressly waive presentment, demand, protest, notice of protest, dishonor, diligence, notice of default or nonpayment, notice of acceptance of this guaranty, notice of the extending of any guaranteed indebtedness already or hereafter contracted for by the Company, notice of any modification or renewal of any credit agreement evidencing the indebtedness hereby guaranteed and to all renewals or extensions of such indebtedness. I further waive any right to require GSW to proceed against, or make any effort at collection of the guaranteed indebtedness from, the Company or any other party liable for such indebtedness.

If the guaranteed indebtedness is not paid by me when due, and this guaranty is placed in the hands of an attorney for collection, or suit is brought hereon, or it is enforced through any judicial proceeding what's over, I shall pay all reasonable attorney fees and court costs incurred by GSW.

In the event more than one party executes this guaranty as guarantor, then each guarantor agrees to be jointly a severally liable for the guaranteed indebtedness, and, in all instances herein, the singular shall be construed to include in plural.

Name of Guarantor: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Home Address: \_\_\_\_\_

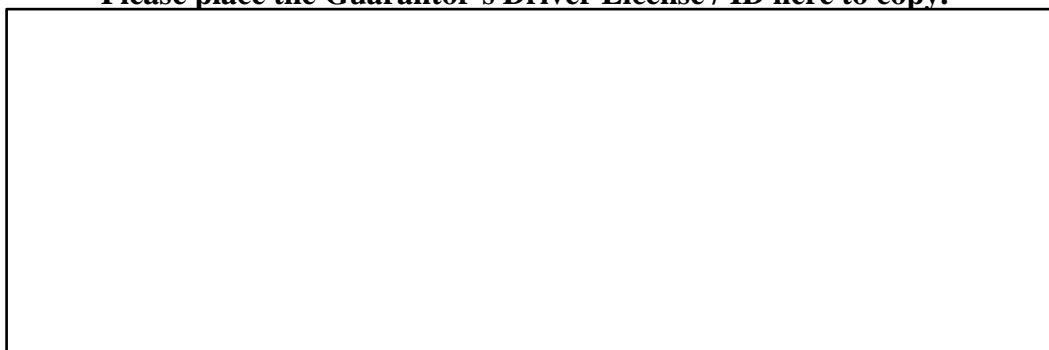
SSN: \_\_\_\_\_

Driver License #: \_\_\_\_\_

Witness's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please place the Guarantor's Driver License / ID here to copy.**





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## BANK ACCOUNT CREDIT VERIFICATION

TO PROCESS CREDIT APPLICATION PROMPTLY, CUSTOMER MUST PROVIDE BANKING INFORMATION:

### 1. TO BE COMPLETED BY THE APPLICANT:

BANK NAME: \_\_\_\_\_ TEL: \_\_\_\_\_

BANK OFFICER: \_\_\_\_\_ FAX: \_\_\_\_\_

BANK ADDRESS: \_\_\_\_\_ ACCOUNT #1: \_\_\_\_\_

ACCOUNT #2: \_\_\_\_\_

APPLICANT'S COMPANY NAME: \_\_\_\_\_

ACCOUNT HOLDER NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_ TEL: \_\_\_\_\_

FAX: \_\_\_\_\_

WE HEREBY AUTHORIZE THE ABOVE MENTIONED BANK TO RELEASE FINANCIAL INFORMATION IN ORDER TO ESTABLISH CREDIT TERM WITH GSW INC.

APPROVED BY (\*WHOM IS THE BANK AUTHORIZED PERSON)

PRINTED NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### 2. TO BE COMPLETED BY THE BANK:

THE COMPANY LISTED ABOVE WOULD LIKE TO ESTABLISH CREDIT TERM WITH GSW. WE WOULD APPRECIATE YOUR FURNISHING US WITH YOUR EXPERIENCE. ALL INFORMATION WILL BE HELD IN A STRICT CONFIDENCE. **PLEASE COMPLETE WHERE APPLICABLE AND FAX THE COPY TO GSW CREDIT DEPARTMENT AT 626-286-0166.** THANKS FOR YOUR VALUABLE INFORMATION.

DATE TO OPEN ACCOUNT: \_\_\_\_\_ EQUITY LINE LIMIT: US\$ \_\_\_\_\_

ACCOUNT #1 BALANCE: US\$ \_\_\_\_\_ FUND AVAILABLE: US\$ \_\_\_\_\_

ACCOUNT #2 BALANCE: US\$ \_\_\_\_\_ NSF CHECK: \_\_\_\_\_

ADDITIONAL COMMENTS: \_\_\_\_\_

COMPLETED BY BANK OFFICER

PRINTED NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



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BANK OFFICER: \_\_\_\_\_ FAX: \_\_\_\_\_

BANK ADDRESS: \_\_\_\_\_ ACCOUNT #1: \_\_\_\_\_

ACCOUNT #2: \_\_\_\_\_

APPLICANT'S COMPANY NAME: \_\_\_\_\_

ACCOUNT HOLDER NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_ TEL: \_\_\_\_\_

FAX: \_\_\_\_\_

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SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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ACCOUNT #1 BALANCE: US\$ \_\_\_\_\_ FUND AVAILABLE: US\$ \_\_\_\_\_

ACCOUNT #2 BALANCE: US\$ \_\_\_\_\_ NSF CHECK: \_\_\_\_\_

ADDITIONAL COMMENTS: \_\_\_\_\_

COMPLETED BY BANK OFFICER

PRINTED NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## 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
-----------------------------	------



STATE OF GEORGIA
DEPARTMENT OF REVENUE
SALES TAX CERTIFICATE OF EXEMPTION
GEORGIA PURCHASER

To: SUPPLIER DATE

SUPPLIER'S ADDRESS CITY STATE ZIP CODE

THE UNDERSIGNED HEREBY CERTIFIES that all tangible personal property purchased or leased after this date will qualify for tax-free or tax exempt treatment as indicated below. (Check the Applicable Box)

- 1. Purchases or leases of tangible personal property or services for RESALE ONLY. O.C.G.A. § 48-8-30. A sales and use tax number is required unless the purchaser is one of the following: church, qualifying tax exempt child caring institution, tax exempt parent-teacher organization or association, private school (grades K-12), nonprofit entity raising funds for a public library, member councils of the Boys Scouts of America or Girl Scouts of the U.S.A. TAX-FREE TREATMENT DOES NOT EXTEND TO ANY PURCHASE TO BE USED BY THE PURCHASER, INCLUDING ITEMS THE PURCHASER WILL DONATE. O.C.G.A. §§ 48-8-3(15), (39), (41), (56), (59), (71).
2. Purchases or leases of tangible personal property or services made by the United States government, the state of Georgia, any county or municipality of this state, fire districts which have elected governing bodies and are supported in whole or in part by ad valorem taxes, or any bona fide department of such governments when paid for directly to the seller by warrant on appropriated government funds. A sales and use tax number is not required for this exemption. O.C.G.A. § 48-8-3(1).
3. Sales of tangible personal property and services made to the University System of Georgia and its educational units, the American Red Cross, a Community Service Board located in this state, Georgia Department of Community Affairs Regional Commissions, or specific qualified authorities provided with a sales tax exemption under Georgia law. A sales and use tax number is not required for this exemption. O.C.G.A. §§ 37-2-6.1(d), 48-8-3(8), 50-8-44.
4. The sale, use, consumption, or storage of materials, containers, labels, sacks, or bags used for packaging tangible personal property for shipment or sale. Materials purchased at a retail establishment for consumer use are not exempt. A sales and use tax number is not required for this exemption. O.C.G.A. § 48-8-3(94).
5. Aircraft, watercraft, motor vehicles, and other transportation equipment manufactured or assembled in this state when sold by the manufacturer or assembler for use exclusively outside this state and when possession is taken from the manufacturer or assembler by the purchaser within this state for the sole purpose of removing the property from this state under its own power when the equipment does not lend itself more reasonably to removal by other means. A sales and use tax number is not required for this exemption. O.C.G.A. § 48-8-3(32).
6. The sale of aircraft, watercraft, railroad locomotives and rolling stock, motor vehicles, and major components of each, that will be used principally to cross the borders of this state in the service of transporting passengers or cargo by common carriers and by carriers who hold common carrier and contract carrier authority in interstate or foreign commerce under authority granted by the United States Government. Replacement parts installed by carriers in such aircraft, watercraft, railroad locomotives and rolling stock, and motor vehicles that become an integral part of the craft, equipment, or vehicle are also exempt. The exemption does not extend to private or contract carriers. O.C.G.A. § 48-8-3(33)(A).
7. Purchases or leases of tangible personal property or services made by the Federal Reserve Bank, a federally chartered credit union, or a credit union organized under the laws of this state. A sales and use tax number is not required for this exemption. 12 U.S.C. §§ 531, 1768 § 1768; O.C.G.A § 48-6-97.

Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, this certificate is true and correct and made in good faith, pursuant to the sales and use tax laws of the State of Georgia. Further, I understand that any tangible personal property obtained under this certificate is subject to sales and use tax if the purchaser uses or consumes the property in any manner other than indicated above.

Purchaser's Name: Sales Tax Number: (IF REQUIRED)

Purchaser's Type of Business:

Purchaser's Address:

Printed Name and Signature: Title:

Telephone Number: Email:

Supplier must secure and maintain one properly completed certificate of exemption from each purchaser making purchases without the payment of tax.

## UNIFORM SALES & USE TAX EXEMPTION/RESALE CERTIFICATE — MULTIJURISDICTION

The below-listed states have indicated that this certificate is acceptable as a resale/exemption certificate for sales and use tax, subject to the notes on pages 2–4. The issuer and the recipient have the responsibility to determine the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: \_\_\_\_\_

Address: \_\_\_\_\_

I certify that:

Name of Firm (Buyer): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

is engaged as a registered

Wholesaler

Retailer

Manufacturer

Seller (California)

Lessor (see notes on pages 2–4)

Other (Specify) \_\_\_\_\_

and is registered with the below-listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, or ingredients or components of a new product or service to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) selling (California) the following:

Description of Business: \_\_\_\_\_

General description of tangible property or taxable services to be purchased from the Seller: \_\_\_\_\_

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL <sup>1</sup>		MO <sup>16</sup>	
AR		NE <sup>16</sup>	
AZ <sup>2</sup>		NV	
CA <sup>3</sup>		NJ	
CO <sup>4</sup>		NM <sup>4,17</sup>	
CT <sup>5</sup>		NC <sup>18</sup>	
FL <sup>6</sup>		ND	
GA <sup>7</sup>		OH <sup>19</sup>	
HI <sup>4,8</sup>		OK <sup>20</sup>	
ID		PA <sup>21</sup>	
IL <sup>4,9</sup>		RI <sup>22</sup>	
IA		SC	
KS		SD <sup>23</sup>	
KY <sup>10</sup>		TN	
ME <sup>11</sup>		TX <sup>24</sup>	
MD <sup>12</sup>		UT	
MI <sup>13</sup>		VT	
MN <sup>14</sup>		WA <sup>25</sup>	
		WI <sup>26</sup>	

I further certify that if any property or service so purchased tax free is used or consumed as to make it subject to a Sales or Use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform the Seller for added tax billing. This certificate shall be a part of each order that we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by thee city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: \_\_\_\_\_

(Owner, Partner, or Corporate Officer, or other authorized signer)

Title: \_\_\_\_\_

Date: \_\_\_\_\_