



Thank you for your application to establish an account with The Trident Company.

Our Credit Policy:

1. A line of credit will be given to accounts upon satisfactory review of credit references and a signed application acknowledging our selling terms. Standard terms are .5% 10 Net 30 Days
2. Accounts will be considered past terms when specific invoices are not paid within the stated selling terms.
3. Accounts with past due invoices must receive credit approval before additional charges may be made using the available credit line.
4. Accounts with invoices that routinely age more than 30 days beyond the due date are at risk for delayed shipments and will be considered for possible "COD Terms" only.

Completed applications may be submitted to:

Jessica Gilby  
Phone: 972.699.3262  
Fax: 972.699.3295  
Email: [JGilby@trident-metals.com](mailto:JGilby@trident-metals.com) (preferred method for submission)

The Trident Company  
ATTN: Jessica Gilby – Credit Department  
PO Box 853900  
Richardson, TX 75085

ATTENTION: It is important that we receive all of the requested information in order to efficiently review your application for terms.

**A few items to note:**

1. **Completed application must be signed by an Officer, Director, or Controller of the Company. (Required for approval)**
2. **Export and Buyer(s) Name(s) section must be completed. (Please include the names of all Purchasing employees that will be authorized to submit PO's to Trident.)**
3. **Specify the dollar amount of the credit line you are requesting.**
4. **A copy of your Resale Tax License or Tax Exemption Certificate must be provided, if applicable. If a form is not provided, the account will be marked taxable.**

Please contact Jessica Gilby, using the contact information above, should you have any questions or concerns in regards to your application.



**Terms:** One half percent (.5%) discount if paid in 10 days, Net balance due 30 days from Invoice date. Any amount not received within 30 days from Invoice date may be subject to a daily interest charge of .0493% (Annual Percent Rate 18.00%). If suit is commenced to collect any past due amounts, prevailing party shall be entitled to reasonable attorney fees and costs. All sales shall be subject to The Trident Company's Terms and Conditions.

\*Required for Processing

Company Name*		President*
Street/Ship* To Address	(Area Code) – Telephone*	Vice President
City/State/Zip*	Fax	Controller
Billing Address*		Authorized Buyer(s)* (Full Name)
City/State/Zip*		Authorized Buyer(s) (Full Name)
Dollar Amount of Credit Line Requested*	Tax ID Number*	Accounts Payable Contact*
Nature of Business (In Detail)		Accounts Payable Telephone Number*
Will you be exporting our Raw material outside of the US?* <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, to which countries?		Accounts Payable Email Address*
Are you a <input type="checkbox"/> Parent Name <input type="checkbox"/> Subsidiary <input type="checkbox"/> Division		Accounts Payable Fax Number
Dun & Bradstreet number (DUNS)		How many years in business?*

**Bank Reference\***

Bank Name	Checking Account #
Address	Loan Account #
City/State/Zip	(Area Code) - Telephone Account Officer

**Trade Reference**

Name*	Contact	Email
Address*	(Area Code) – Telephone*	
City/State/Zip*	Fax	
Name*	Contact	Email
Address*	(Area Code) – Telephone*	
City/State/Zip*	Fax	
Name*	Contact	Email
Address*	(Area Code) – Telephone*	
City/State/Zip*	Fax	
Name	Contact	Email
Address	(Area Code) - Telephone	
City/State/Zip	Fax	

**Office Use Only**

Comments	Credit Limit
	Terms
Credit Manager Signature	Salesman

Approved  COD Remit payments to: P.O. Box 846196, Dallas, Texas 75284-6196

**NOTICE--BY SIGNING THIS APPLICATION THE COMPANY AGREES TO THE FOLLOWING:**

The Company understands and agrees that the above information is being providing for the purpose of obtaining credit. The Company represents and warrants that all information is true and correct and agrees to promptly inform The Trident Company in writing of any changes in the information, including a change of the Company's principal place of business or billing address.

The Company hereby consents to and authorizes The Trident Company to obtain information and investigate all information provided including contacting the references listed. The Company releases The Trident Company, and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

Name \_\_\_\_\_

Signature\* \_\_\_\_\_

Position\* \_\_\_\_\_

Must be signed by Owner,  
Officer, Controller or Company Principal

Date \_\_\_\_\_





STATE OF GEORGIA
DEPARTMENT OF REVENUE
SALES AND USE TAX CERTIFICATE OF EXEMPTION
GEORGIA PURCHASER OR DEALER
EFFECTIVE JULY 1, 2000

To: \_\_\_\_\_ (SUPPLIER) (MM/DD/YY) \_\_\_\_\_ (DATE)

\_\_\_\_\_ (ADDRESS)

THE UNDERSIGNED HEREBY CERTIFIES that all tangible personal property purchased or leased after this date will be for the purpose indicated below, unless otherwise specified on a particular order, and that this certificate shall remain in effect until revoked in writing. Any tangible personal property obtained under this certificate of exemption is subject to the sales and use tax if it is used or consumed by the purchaser in any manner other than indicated on this certificate. (Check proper box.)

- [ ] 1. Resale, rental or leased only, including but not limited to the purchase for resale of gasoline and other motor fuels.
[ ] 2. Materials for further processing, manufacture or conversion into articles of tangible personal property for resale which will become a component part of the property for sale, or be coated upon or impregnated into the product at any stage of its processing, manufacture or conversion and nonreturnable materials used for packaging tangible personal property for shipment or sale. Containers or other packaging materials purchased for reuse are not exempt.
[ ] 3. Machinery used directly in the manufacture of tangible personal property for sale purchased as additional, replacement or upgrade machinery to be placed into an existing plant in this State.
[ ] 4. Direct Pay Permit authorized under Regulation 560-12-1-.16. The holder of a Direct Pay Permit must pay the 3% Second Motor Fuel Tax to suppliers on purchases of gasoline.
[ ] 5. For use by Federal Government, State Government, any county, municipality or public school system of this State, when supported by official purchase orders or for use by Hospital Authorities created by Article 4, Chapter 7, of Title 7, and County or City Housing Authorities created by Article 1, Chapter 3 of Title 8. The State of Georgia, counties, municipalities, public schools, Hospital and Housing Authorities of Georgia must pay the 3% Second Motor Fuel Tax to suppliers.
A Georgia Sales and Use Tax Certificate of Registration Number is not required for this exemption.
[ ] 6. Aircraft, watercraft, motor vehicles and other transportation equipment manufactured or assembled, sold and delivered by the manufacturer or assembler for use exclusively outside this State, or delivery of the crafts is for the sole purpose of removing same under its own power when it does not lend itself more reasonably to removal by other means.
A Georgia Sales and Use Tax Certificate of Registration Number is not required for this exemption.
[ ] 7. Aircraft, watercraft, railroad locomotives and rolling stock, motor vehicles and major components of each, which 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 craft or vehicles which become an integral part of the craft or vehicle are likewise exempt. Private and contract carriers are not exempt.

\_\_\_\_\_ (TYPE OF BUSINESS ENGAGED IN BY THE PURCHASER) \_\_\_\_\_ (COMMODITY CODE)

I declare, under penalties of false swearing, that this certificate has been examined by me and to the best of my knowledge and belief is true and correct, made in good faith, pursuant to the sales and use tax laws of the State of Georgia.

\_\_\_\_\_ (PURCHASER'S FIRM NAME) \_\_\_\_\_ (CERTIFICATE OF REGISTRATION NO.)

\_\_\_\_\_ (ADDRESS)

By \_\_\_\_\_ (SIGNATURE) Title \_\_\_\_\_ (OWNER, PARTNER, OFFICIAL)

A supplier is required to have only one certificate of exemption form on file from each purchaser buying tax exempt. The supplier must exercise ordinary care to determine that the tangible personal property obtained under this certificate is for the purpose indicated. Suppliers failing to exercise such care will be held liable for the sales tax due on such purchases. For example, a supplier cannot accept a Certificate of Registration number bearing a "214" prefix since these are issued to a Contractor which has been deemed to be the consumer and is required to pay the tax at the time of purchase.