

NEW ACCOUNT FORM North Shore Steel

P. O. Box 9940
Houston, Texas 77213-0940

www.nssco.com

Phone (713) 453-3533
Credit Department Fax (713) 671-5581

Today's date / / Name of person completing this form
Full legal name of Company applying for credit Date Company established
Phone Number Accounts Payable Fax Number
Physical street address City State Zip
Billing address City State Zip
Home office address City State Zip

If you have a website, what is the site address? Toll free phone if you have one
Accounts payable contact Phone Email

It is our company procedure to email invoices instead of sending them through the mail. Email(s) we should use
We will send you a link where you may view or print any open invoices 24 hours a day 7 days a week.

Would you like your buyer to be copied on the invoices when we email them to you? Yes No
Usual check signer Phone Cell

Are you Taxable? Yes No If you do not want to be charged tax you must complete, sign and return the attached resale certificate.
Type of business you are engaged in or product you manufacture or industry you serve



Check only one of the following A, B, C or D and complete the section of the box you check.

Public Company what is your stock symbol? what exchange are you traded on?

B Corporation are you an LLC? Yes No

Corporate Officers Names Residence Address...city...state...zip Residence or Cell Phone number
President
Vice President
Secretary/ Treasurer
Other Officer

Majority Stockholders Names Residence Address... city...state...zip Residence or Cell Phone Ownership %

C Partnership are you an LLP? Yes No

Partners Names Residence Addresses... city...state...zip Residence or Cell Phones % of ownership

D Sole Proprietorship

Owners Name Residence Address... city...state...zip Residence or Cell Phone



Have any of the principles or employees purchased from us under any other name style? Yes No If yes, what company(s)?
Do any of the above listed principles own any other active businesses? Yes No

If yes, please provide the company names to help us with our credit investigation.

Have any of the principles listed above ever been involved in any business or personal dealings that have involved bankruptcy proceedings?
Yes No If yes, please explain and list case number:

If your company is less than one year old, where were the principles working before this company was formed?

**BANK AND TRADE REFERENCES** (If Possible, Please provide references with email addresses or toll free phone and fax numbers) If your bank requires your authorization to release credit information, please notify your officer that we will be calling or faxing them soon. Also, by having an authorized officer of your company sign the following statement, North Shore Steel, can, by fax give proof to your bank that you are authorizing them to release credit information. This will expedite the process of establishing a charge account for your company.

**I, the undersigned official, authorize North Shore Steel to contact my bank(s), other financial Institutions my company deals with, my creditors, or any credit reporting agency, to obtain ratings now and hereafter for the purpose of granting or maintaining a credit line at North Shore Steel.**



AUTHORIZED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

❖ ❖ In lieu of filling out the bank and trade references, if you have one, you may provide a preprinted reference sheet

**1st BANK** \_\_\_\_\_ ACCT # \_\_\_\_\_ OFFICER'S NAME \_\_\_\_\_  
 OFFICER'S EMAIL \_\_\_\_\_ PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_

**2nd BANK** \_\_\_\_\_ ACCT # \_\_\_\_\_ OFFICER'S NAME \_\_\_\_\_  
 OFFICER'S EMAIL \_\_\_\_\_ PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_

**TRADE REFERENCES**

**1. COMPANY** \_\_\_\_\_ EMAIL ADDRESS OF THEIR CREDIT DEPT \_\_\_\_\_  
 FAX \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ TOLL FREE PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

**2. COMPANY** \_\_\_\_\_ EMAIL ADDRESS OF THEIR CREDIT DEPT \_\_\_\_\_  
 FAX \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ TOLL FREE PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

**3. COMPANY** \_\_\_\_\_ EMAIL ADDRESS OF THEIR CREDIT DEPT \_\_\_\_\_  
 FAX \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ TOLL FREE PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

**4. COMPANY** \_\_\_\_\_ EMAIL ADDRESS OF THEIR CREDIT DEPT \_\_\_\_\_  
 FAX \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ TOLL FREE PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

**I, the undersigned official, agree that North Shore Steel may charge interest at the highest allowable rate by law on all past due accounts.**



AUTHORIZED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

Does your company issue purchase orders? Yes  No  Desired line of credit? \$ \_\_\_\_\_

List people authorized to purchase:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
 4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

Does your company (check one) OWN  or LEASE  the facility at which they operate? If leased, please give the landlord's  
 NAME \_\_\_\_\_ PHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

How did you hear about North Shore?  Internet  Word of mouth from \_\_\_\_\_  Salesperson ( name) \_\_\_\_\_  
 Other \_\_\_\_\_

Please **FAX** this form to North Shore Steel's credit department at **713 671-5581**, or email it to [AR@nssco.com](mailto:AR@nssco.com) so that we may begin the credit investigation necessary to establish a charge account.

You may email any additional documentation to [AR@nssco.com](mailto:AR@nssco.com) . If your company pays by wire or ACH, email us and ask for our wire payment information and we will send it back to you. If you need a W-9, please request one by email.

Please use the correct remit to address to set us up as a vendor in your computer:  
 Regular Remit To: Atten: AR North Shore Steel PO Box 9940 Houston, TX 77213-0940  
 Overnight Remit To: Atten: AR North Shore Steel 1566 Miles St Houston, TX 77015

**PERSONAL GUARANTY**

STATE OF TEXAS  
COUNTY OF HARRIS

Please sell to \_\_\_\_\_ hereinafter referred to as purchaser, on your usual credit terms such goods and services as it or its representatives may select, from and after this date, in consideration of which the undersigned unconditionally personally guarantee the payment at Houston, Texas, of the purchase price and credit, or related charges whether now due or to become due, of all such goods and services, and of any and all sums of any nature owing by corporation to NORTH SHORE STEEL (NORTH SHORE).

The undersigned understand that they accept personal liability for the indebtedness incurred by the corporation. And, signing this agreement as an agent or officer of the corporation in no way invalidates this personal liability. The undersigned hereby waive notice of acceptance hereof, and of amounts of sales and dates of shipments, and the undersigned likewise waive notice of default, demand for payment and any requirements of legal proceedings against corporation.

The undersigned also agree that said indebtedness or any part of it may be changed in form and in terms of payment as often as may be agreed upon between you and the corporation and that no change in the form of personnel of corporation shall affect this Guaranty Agreement.

The undersigned further agree to pay NORTH SHORE, or to its successors or assigns, all reasonable attorneys fees incurred by NORTH SHORE or its successors or assigns in enforcing this agreement if said sums are not paid by the undersigned upon written demand to the undersigned when due as required herein, or if this agreement is enforced by suit or through probate, bankruptcy, or other judicial proceedings, then the undersigned further agree that all sums due and owing after written demand is made upon the undersigned shall accrue interest at the rate of 10% per annum.

The undersigned further agree that this is a continuing guaranty which is not extinguished in whole or part by payment of any amount hereunder. Liability as guarantors hereunder shall continue until written notice of termination sent by certified mail is actually received by NORTH SHORE and such notice shall not be effective only as to that individual guarantor and shall not be effective for obligations arising prior to the actual receipt of such notice.

DATED \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
GUARANTORS NAME (TYPED OR PRINTED)

\_\_\_\_\_  
GUARANTORS NAME (TYPED OR PRINTED)

\_\_\_\_\_  
GUARANTORS HOME STREET ADDRESS

\_\_\_\_\_  
GUARANTORS HOME STREET ADDRESS

\_\_\_\_\_  
CITY STATE ZIP

\_\_\_\_\_  
CITY STATE ZIP


 \_\_\_\_\_  
GUARANTORS SIGNATURE

 \_\_\_\_\_  
GUARANTORS SIGNATURE



**CUSTOMER'S RELEASE**

Customer agrees to indemnify and hold North Shore Steel harmless for all claims, actions, demands, loss, and cause of action arising from injury, including death, to any person, or damage to any property when such injury or damage results in whole or part from the negligence of customer, customers employees, and sub contractors, or subcontractor's employees.

 \_\_\_\_\_  
Signed

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Dated

\_\_\_\_\_  
For (Name of Company)

TEXAS SALES TAX RESALE CERTIFICATE

Name of purchaser, firm or agency \_\_\_\_\_

Phone (Area code and number) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address (Street & number, P.O. Box or Route number) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Texas Limited Sales Tax Permit Number (or out of state retailer's registration number or date applied for Texas permit):**

\_\_\_\_\_

I, the purchaser named above, claim the right to make a non-taxable purchase for resale of the taxable items described below or on the attached order or invoice from seller:

**North Shore Steel      P 0 Box 9940      Houston TX 77213-0940**

Description of the items to be purchased, or on the attached order or invoice:

**Steel, Pipe, Plate, Fittings, Flanges, or Fabricated Items** (or list other below)

\_\_\_\_\_

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

\_\_\_\_\_

\_\_\_\_\_

The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions, in its present form or attached to other personal property to be sold.

I understand that if I make any use of the item other than retention, demonstration or display while holding it for sale, lease or rental. I must pay sales tax on the item at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a misdemeanor to give a resale certificate to the seller for taxable items which I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental, and that upon conviction I may be fined not more than \$500 per offense.



\_\_\_\_\_  
Signature of Purchaser

\_\_\_\_\_  
Title

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

*This certificate should be furnished to the supplier. Do not send the completed certificate to the Comptroller of Public Accounts.*