

Air Management Supply (AMS)
Nelson Hagy
12302 Cary Circle
La Vista, NE 68128
402-896-1277 * FAX-402-597-2518
Attn: Toni Murcek – Credit Manager

CREDIT APPLICATION

Date: _____

Omaha _____ Sioux Falls _____ Minneapolis _____ St. Louis _____

Des Moines _____ Cedar Rapids _____ Waterloo _____

Air Management Salesman _____

Exact Legal Name of Entity Applying for Credit (Customer)

Physical Address:

Mailing Address:

Phone Number: _____ Fax Number: _____

Email Address: _____

Tax Exempt Number _____ Fed ID# _____ SS# _____

Corporation _____ Partnership _____ Sole Proprietor _____

Annual Sales Volume How long in Business? Credit Limit Desired

Have you ever filed bankruptcy? YES / NO

PO number required on orders? YES / NO

Full name, address & phone numbers of all owners/shareholders/partners

Trade references, address, phone numbers & account numbers

Bank name, address, phone numbers & account number

TERMS OF SALE

The undersigned, whether one or more, acknowledges and agrees that account terms shall be 1% 10th, net 25th: that the information furnished herein is for the purposes of inducing AMS to provide credit that AMS may verify information supplied on the application and receive and exchange credit both now and in the future: that applicant is authorized to bind itself and its principal in accordance with the terms herewith; that all monies due bear interest at the rate of one and one half percent (1 ½ %) per month; that in the event an account is referred to an attorney for collection, all reasonable court costs and attorney's fees shall be paid and that credit provided for herein may be modified or terminated by AMS without further notice. This account shall be governed by and construed in accordance with the laws of the state of Nebraska, without regard for its conflict of laws rules. Customer hereby submits to non-exclusive jurisdiction of the United States District Court for Nebraska and of any Nebraska state court, including Small Claims Court, located in the County of Sarpy, Nebraska for the purposes of all legal proceedings arising out of or relating to this account or the transactions contemplated hereby. Customer irrevocably waives, to the fullest extent permitted by law, any objection which it may now or hereafter have to the laying of the venue of any such proceeding brought in such a court or any claim that any proceeding brought in such a court has been brought in an inconvenient form. Customer hereby irrevocably waives all right to a trial by jury in any legal proceeding arising out of or relating to the account or the transactions contemplated hereby.

In consideration of credit being extended to the above name firm, I personally guarantee all indebtedness hereunder. I further agree that this guarantee is an absolute, completed and continuing one and no notice of the indebtedness or any extension of credit already or hereafter contracted by or extended need be given. The terms may be re-arranged, extended and/or renewed without notice to me. That I will within (10) days from the date of notice that account is past due, pay the amount due. This guaranty shall be governed by and construed in accordance with the laws of the State of Nebraska, without regard for its conflict of law rules. Guarantor hereby submits to the non-exclusive jurisdiction of the United States District Court of Nebraska and of any Nebraska state court, including Small Claims Court, located in the County of Sarpy, Nebraska for the purposes of all legal proceedings arising out of or relating to this guaranty or the transactions contemplated hereby. Guarantor irrevocably waives, to the fullest extent permitted by law, any objection which he may now or hereafter have to the laying of the venue of any such proceeding brought in such a court in any claim that any proceeding brought in such a court has been brought in an inconvenient form. Guarantor hereby irrevocably waives all right to a trial by jury in any legal proceedings arising out of or relating to this guaranty or the transactions contemplated hereby.

Signed X _____ Signed X _____

(Print name) _____ (Print name) _____

Title _____ Title _____

PLEASE ATTACH A COPY OF YOUR REFRIGERANT CERTIFICATION CARD WITH CREDIT APPLICATION.

BLANKET SALES AND USE TAX EXEMPTION CERTIFICATE

The undersigned purchaser hereby certifies that it is a regularly licensed retailer under the law(s) of the state(s) indicated on this form. Holding the sales tax license or permit number(s) here enumerated and that all the tangible personal property purchased from Air Management Supply, Inc. is exempt from sales and use tax for the following reason:

PLEASE CHECK ONE OF THE FOLLOWING REASONS:

- ☐ Sales for resale, leasing or renting
- ☐ Property used or consumed in manufacturing, processing, or fabricating.
- ☐ Materials and supplies loaded on board interstate and foreign vessels.
- ☐ Religious, charitable, educational, or public service organization.
- ☐ Instrumentality of the United States, the State, or Political Subdivision.
- ☐ Direct payment authorization number.
- ☐ Other authorized exemption: (Please Describe):
- _____
- _____

Describe your principal business activity:

This certificate shall be considered a part of each order given by purchases from and after the effective date. Hereof unless such order shall otherwise specify. It shall continue in full force and effect unless and until revoked in writing by purchaser.

The purchaser understands and agrees that if it uses any property purchased tax-free under this certificate in any manner which would not exempt the sale of tax; it becomes the user or consumer of such property, As such assumes liability for and undertakes to pay the tax and the interest and penalty thereon, if any.

PLEASE FILL IN ALL STATES FOR WHICH YOU ARE CLAIMING EXEMPT STATUS.

(State registration/exemption number is required for each exempt state.)

IL	MO	SD
ND	MN	WI
IA	NE	KS
STATE	STATE	STATE
STATE	STATE	STATE

PLEASE ENTER YOUR TAXPAYER IDENTIFICATION NUMBER “TIN”(9 DIGITS) IN THE APPROPRIATE BOX:

For individuals and sole proprietors, this is your social security number (SSN). For other entitles, it is your employer identification number (EIN).

Federal Employer’s Identification Number Social Security Number

Date: _____

Purchaser/ Company Name:

Mailing Address:

Signature: _____ Title: _____