



Central Steel
Service, Inc.

**Your Source
For High Strength
& Weathering Steel**

Thank you for your interest in Central Steel Service, Inc.

If you would like to apply for open terms, please complete each form attached and return to us at your earliest convenience. If you have pre-printed information, we can accept as long as all information we request is provided. It is imperative that we receive our Terms & Conditions page back signed by an officer of your company. We will expedite our credit evaluation wherever possible, but please understand that this process is dependent on your reference's prompt response to our inquiries.

For your convenience, we've attached information on our company for your vendor to set up and a copy of our W-9.

Sincerely,

Keith Woods

President

Central Steel Service, Inc.



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Your Source For High Strength & Weathering Steel

CUSTOMER CREDIT APPLICATION

CUSTOMER NAME _____

FED. ID# _____

BILL TO ADDRESS _____

CITY _____ STATE _____ ZIP _____

SELECT PREFERRED METHOD FOR RECEIVING INVOICES: MAILED__ EMAILED__ (*PROVIDE EMAIL ADDRESS BELOW IN A/P SECTION)

SHIP TO ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____ FAX NUMBER _____

INDIVIDUAL _____ CORP. _____ PARTNERSHIP _____

DATE THE COMPANY STARTED _____ STATE OF INCORPORATION _____

OWNER/OFFICER _____

PURCHASING AGENT _____

PURCHASING AGENT EMAIL _____

ACCOUNTS PAYABLE _____

ACCOUNTS PAYABLE *EMAIL _____

PRIMARY BUSINESS ACTIVITY/INDUSTRY _____

COMPANY WEBSITE ADDRESS _____

REFERENCES:

BANK NAME _____ CONTACT _____

ACCOUNT NUMBER _____ PHONE _____ FAX _____

PLEASE SIGN FOR BANK TO RELEASE REFERENCE INFORMATION _____

- Continued next page -



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MAJOR SUPPLIERS:

1. COMPANY: _____ PHONE #: _____ FAX #: _____
CONTACT NAME: _____ EMAIL: _____
2. COMPANY: _____ PHONE #: _____ FAX #: _____
CONTACT NAME: _____ EMAIL: _____
3. COMPANY: _____ PHONE #: _____ FAX #: _____
CONTACT NAME: _____ EMAIL: _____
4. COMPANY: _____ PHONE #: _____ FAX #: _____
CONTACT NAME: _____ EMAIL: _____
5. COMPANY: _____ PHONE #: _____ FAX #: _____
CONTACT NAME: _____ EMAIL: _____

IF SALES TAX EXEMPT, ENTER EXEMPTION NUMBER _____ AND ATTACH CERTIFICATE.

CREDIT TERMS: 1/2% 10 DAYS, NET 30. IT IS UNDERSTOOD THAT ANY PAST DUE BALANCE SHALL ACCRUE INTEREST AT 1-1/2% PER MONTH. PLEASE REVIEW, SIGN AND RETURN THE TERMS AND CONDITIONS FORM ALSO INCLUDED IN THIS PACKET.

NAME _____

TITLE _____

DATE _____



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CUSTOMER SHIPPING AND RECEIVING INFORMATION

CUSTOMER NAME: _____

SHIPPING CONTACT: _____

SHIPPING CONTACT EMAIL: _____

SHIP TO ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

RECEIVING HOURS: _____

TELEPHONE NUMBER: (____) _____ FAX NUMBER: _____

SHIPPING/RECEIVING REQUIREMENTS:

CAN YOUR RECEIVING DEPARTMENT UNLOAD THE FOLLOWING? FLATBEDS _____ CLOSED VANS _____

DO YOU REQUIRE MATERIAL TO BE TARPED? _____

DO YOU REQUIRE PALLETS? (CHARGES WILL APPLY) _____

HOW DO YOU OFFLOAD? OVERHEAD CRANE _____ FORKLIFT _____

WHAT IS THE MAXIMUM BUNDLE WEIGHT THAT YOUR COMPANY CAN HANDLE? _____

SHIPMENT NOTIFICATION FORMS SHOULD BE FAXED ATTENTION:

NAME: _____ FAX NUMBER (____) _____

PLEASE SPECIFY ANY OTHER SHIPPING/RECEIVING REQUIREMENTS: _____

Thank You for completing this information. This will help to ensure efficient delivery of products to your company.



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UNIFORM SALES & USE TAX CERTIFICATE FORM, MULTI-JURISDICTION

Issue to: Central Steel Service, Inc.

Name of Firm (Buyer): _____

Address: _____

City: _____ State: _____ Zip: _____

Nature of Business:

__ Wholesaler

__ Retailer

__ Manufacturer

__ Other

and is purchasing for:

__ Resale

__ Leasing

__ Processing

__ Other

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

General description of products to be purchased from the seller: _____

State Registration or ID No. _____

City/State Registration or ID No. _____

I further clarify that if any property so purchased tax free is used or consumed by the firm as to make it subject to Sales or use Tax, we will pay the tax due direct to the proper authority when state law so provides or inform the seller for added tax billing.

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: _____

Title: _____ Date: _____



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TERMS AND CONDITIONS

1. The invoice and these terms and conditions shall be deemed an offer or counter offer, as applicable. All sales shall be governed exclusively by the terms and conditions set forth herein. Buyer, by accepting the products sold under the invoice and these terms and conditions (the "Products"), by written acknowledgement, or by payment for Products ordered, shall be deemed to have assented to the terms and conditions set forth herein, notwithstanding any terms contained in any prior or later communication from Buyer and whether or not Seller shall specifically or expressly object to any such terms.
2. Seller shall not be liable for failure to perform or for any delay in performance arising directly or indirectly from any cause beyond the reasonable control of Seller, whether or not any such cause exists of the date hereof.
3. Terms of payment shall be designated by the Seller's Credit Department. The Seller shall, without liability have the right to suspend shipment or delivery if the Seller, in its sole discretion, deems such action necessary or advisable to protect its interest. Buyer shall pay to Seller the reasonable costs of collecting or securing money due and unpaid, including a reasonable attorney's fee. All indebtedness hereunder shall bear interest from maturity at the rate of eighteen percent (18%) per annum.
4. All Products are shipped EXQ per the January edition of Incoterms 2000. "EXW" shall mean that Seller delivers when it places the Goods at the disposal of the Buyer at the Seller's premises or another named place (i.e. works, factory, warehouse, etc.) not cleared for export and not loaded in any collecting vehicle
5. All prices are exclusive of federal, state or local sales, use, excise or similar taxes applicable to the sale or to the Products sold. Such taxes, if any, shall be paid by the Buyer.
6. Specifications and instructions on the face of the invoice are in accordance with Buyer's direction, and the Buyer assumes full responsibility for the correctness of such specifications and instructions.
7. Buyer must notify Seller in writing within thirty (30) days after tender of delivery to, or receipt of, the Products, if the Products are found defective in any respect. The failure of Buyer to inform Seller within such time, or the Buyer's use of the Products shall be considered acceptance of the Products so tendered or received.
8. No Products may be returned for credit and no order may be cancelled, in whole or in part, without prior written consent of Seller.
9. Seller's waiver of any breach under this contract shall not be constructed as a waiver of any other breach.
10. Written or typed provisions on the face of the invoice or these terms and conditions shall govern in the event of a conflict with printed provisions.
11. All actions or proceedings arising out of or relating to the invoice, these terms and conditions, or Buyer's purchase of the Products shall be tried and litigated exclusively in the state or federal courts located in Jefferson County, Alabama.
12. There are no terms, conditions, understandings or agreements between Buyer and Seller other than those stated in the invoice or terms and these conditions, and all prior proposals and negotiations are merged herein and therein. NO terms and conditions in any way altering or modifying the provisions hereof shall be binding upon Seller unless in writing and signed by an authorized representative of Seller. No modification or alteration of the provisions herein shall result from Seller's shipment of Products following receipt of Buyer's purchase order, shipping order, or other forms containing provisions, terms or conditions in addition to or in conflict or inconsistent with the provision hereof.
13. Seller warrants that the Products sold under the invoice at the time of initial shipment, conform to the specifications for the Products. Except as otherwise provided in the invoice, all Products furnished, and the calculation of all weights, will be in accordance with the Code of Standard Practice of the American Institute of Steel Constructions, editions current as of the date of the invoice. The warranty shall be void in the event that the Products fail, malfunction, or are damaged as a result of improper handling, installation, maintenance, removal, modification or repair, or are accidentally damaged, subjected to abuse or improper use, or are altered or damaged by the Buyer or its employees, contractors, or agents. ALL OTHER WARRANTIES ARE EXCLUDED, WHETHER EXPRESS OR IMPLIED BY OPERATION OF LAW OR OTHERWISE, INCLUDING ALL IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS. SELLER SHALL NOT BE LIABLE FOR INCIDENTAL, SPECIAL, OR CONSEQUENTIAL DAMAGES, INCLUDING LOSS OF PROFITS WHETHER FORESEEABLE OR UNFORESEEABLE, AND WHETHER DIRECTLY OR INDIRECTLY ARISING OR RESULTING FROM THE BREACH OF ANY OF THE TERMS HEREOF, OR FROM THE SALE, HANDLING OR USE OF THE PRODUCTS SOLD. Buyer shall give the Seller prompt notice of, and an opportunity to inspect, any Products which Buyer claims do not conform to the specifications listed on the invoice, or to any Products which Buyer claims are defective. Seller's liability hereunder, either breach of warranty or for negligence is expressly limited, at the option of Seller, to performance within one year from tender of delivery to one of the following: A) Replacement at the agreed point of delivery of any Products found to be defective, or to any Products that fail to conform to the specifications set forth on the invoice, B) Repair of such Products, or C) Refund or crediting to Buyer for the price of the Products.
14. Prices quoted are subject to adjustment for increases, if any, if present mill price or freight changes materially prior to shipment.

Company Name: _____ Signed By: _____ Title: _____ Date: _____



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Central Steel Service, Inc.

Mailing Address: P.O. Box 1506, Pelham, AL 35124

Shipping Address: 2764 Welborn Street, Pelham, Alabama 35124

Website: www.centralsteelservice.com

Phone Number: 800-868-6798 ; 205-664-2950;

Facsimile Number: 205-663-3391

Federal Tax ID#: 63-0799481

President: Keith Woods

Email Address: kwoods@centralsteelservice.com

Shipping/Receiving: Joe Leslie

Email address: jleslie@centralsteelservice.com

Accounting Contact: Kelli D. Buryrn

Email Address: kburyrn@centralsteelservice.com

Shipping and Receiving Hours: Monday – Friday 7:00 a.m. – 3:30 p.m.

Terms: ½% 10, Net 30, based upon credit approval

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.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. CENTRAL STEEL SERVICE, INC	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input checked="" 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) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	5 Address (number, street, and apt. or suite no.) P O BOX 1506	
	6 City, state, and ZIP code PELHAM, AL 35124	
	7 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 line 1 to avoid backup withholding. For individuals, this is generally 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 <i>How to get a TIN</i> on page 3.																																																											
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.																																																											
	<table border="1" style="margin: auto;"> <tr><td colspan="9" style="text-align: center;">Social security number</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> <tr><td colspan="3"></td><td style="text-align: center;">-</td><td colspan="3"></td><td style="text-align: center;">-</td><td colspan="3"></td></tr> <tr><td colspan="9" style="text-align: center;">OR</td></tr> <tr><td colspan="9" style="text-align: center;">Employer identification number</td></tr> <tr><td style="width: 20px; height: 20px;">6</td><td style="width: 20px; height: 20px;">3</td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;">-</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">7</td><td style="width: 20px; height: 20px;">9</td><td style="width: 20px; height: 20px;">9</td><td style="width: 20px; height: 20px;">4</td><td style="width: 20px; height: 20px;">8</td><td style="width: 20px; height: 20px;">1</td></tr> </table>	Social security number																					-				-				OR									Employer identification number									6	3		-	0	7	9	9	4	8	1
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Employer identification number																																																											
6	3		-	0	7	9	9	4	8	1																																																	

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 ▶ <u>2-15-23</u>

General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

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. See *What is FATCA reporting?* on page 2 for further information.