



## **Application Information for New and Renewal Accounts**

Thank you, for your interest in opening an account with Aetna Plywood, Inc. Please complete both pages of the new account application and one of the tax forms where applicable. If you are applying for COD terms we still need all the forms completed and returned to us. Please note that the forms must be signed. Forms without signatures are not processed.

Tax certification is required of us by the states of Illinois, Indiana, Michigan, Wisconsin and Minnesota. If your business is in one of these states your account will be charged sales tax unless the proper form is completed, signed and included with the new account application.

Return pages one and two of the new account application and the tax certificate by fax to:

White Bear Lake Sales Office 651-407-2801

We look forward to welcoming you as one of our important customers.

# AETNA PLYWOOD, INC.

4250 Otter Lake Rd, White Bear Lake, MN 55110

Continued on page 2 of form, this is page 1

(651) 407-2800 fax (651) 407-2801

<b>Legal Name of Business</b>		<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership
Years in business	Number of employees	<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Corp (LLC)
		Federal Identification Number (required)

Billing Address (street and number)	Main Phone
City/State/Zip	Fax
Send invoices to this email address (fax or email required)	(or) Fax invoices to this fax number
Do you require purchase orders to appear on your invoices? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you prefer COD terms? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you require an order acknowledgement? Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>Your Ship To Address, if different from billing address</b>	<b>Special delivery instructions</b>
Nearby major intersecting streets, highways or roads:	<input type="checkbox"/> Hand unload <input type="checkbox"/> Side unload <input type="checkbox"/> Drive on <input type="checkbox"/> 40' truck okay
	Receiving Hours _____

<b>Owners, Partners, or Corporate Officers:</b>		
(2) Name and title	Mobile phone	Email address
(3) Name and title	Mobile phone	Email address
The undersigned hereby consents to Aetna Plywood Inc.'s use of a non-business consumer credit report on the undersigned in order to further evaluate the credit worthiness of the undersigned as principal, proprietor, partner and/or guarantor in connection with the extension of business credit as contemplated by this credit application. The undersigned hereby authorizes Aetna Plywood Inc. to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the business credit represented by the credit application. The undersigned as individual hereby knowingly consents to the use of such credit report consistent with the Federal Fair Credit Reporting Act.		
<b>Applicant's signature:</b> ✓ _____		<b>Date:</b> _____
<b>Print Name:</b> _____		

<b>PERSONAL GUARANTY</b>
The undersigned hereby personally guarantees any existing or hereinafter created indebtedness by the Applicant to Aetna Plywood, Inc, and waives presentment and demand for payment, notice of payment, notice of non-payment, protest and notice of protest, and consents without notice of any extensions of time or increase in the amount of the credit given. This is intended to be continuing guarantee and shall continue as to all new indebtedness incurred unless and until a written notice is served upon Aetna Plywood, Inc. by certified mail-return receipt requested; declaring said personal guarantee shall not apply to future purchases. Guarantor consents to allow Aetna Plywood Inc. to change or modify the terms of sale without notice to or authorization of the guarantor. Guarantor assumes all responsibility for staying advised as to the Applicant's financial condition and risk.
<b>Guarantor's Signature as individual:</b> ✓ _____ <b>Date:</b> _____
(not in the capacity of corporate officer)

<b>For Office Use Only</b>				
Class:	Salesperson:	Mailing:	Customer Number:	Approved/Date:

**Trade References (Required for open account terms. Not providing references will result in COD terms:**  
Provide a separate list of trade references with name, fax and/or email contact information.

<u>Laminate and Solid Surface</u> Name	<u>Granite and Quartz</u> Name	<u>MDF, Melamine &amp; related</u> Name	<u>Hardware</u> Name
_____	_____	_____	_____
Purchases _____	Purchases _____	Purchases _____	Purchases _____
\$ _____/month	\$ _____/month	\$ _____/month	\$ _____/month

Primary Business Classification (check only one)

Tops/Post-forming  
  Store Fixtures/P.O.P/Displays  
  Cabinet Mfg.  
  Furniture  
  Arch. Millwork  
  Signs  
  Stone Fabricator  
  Plywood  
  Closets  
 RV/Mobile Homes  
  Games  
  Institution  
  Ceiling-Wall

Who is will be placing orders? Name: _____ Email: _____	Who do we speak to about payments? Name: _____ Email: _____
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**AGREEMENT FOR A COMMERCIAL ACCOUNT WITH AETNA PLYWOOD, INC.**

Applicant hereby applies to Aetna Plywood, Inc. ("Aetna") to open a commercial account in Applicant's name and hereby requests Aetna from time to time to extend credit to enable Applicant to buy merchandise from Aetna for business or commercial purposes only. As an inducement to Aetna to extend credit, and in consideration of Aetna agreeing to extend credit to Applicant, Applicant states as follows:

- Applicant represents and warrants that all information including but not limited to the information on the Application for Credit, given in connection with this Application and Agreement ("Agreement") is true and correct as of the date of this application. Applicant agrees to provide Aetna with notice of changes to the information contained on the face and back of this agreement as they occur.
- Applicant agrees to pay within thirty days of the date of the invoice for all merchandise delivered on that invoice. ("Payment Due Date")
- If any invoice remains unpaid after the Payment Due Date then Aetna has the right to not deliver further orders and need not notify Applicant.
- If any amount due for any merchandise remains unpaid on the last business day of the month in which the Payment Due Date falls, Applicant shall pay to Aetna a late charge on all past due amounts from the first day of the month immediately following the month in which the Payment Due Date falls until such amounts are paid in full.
- The late charge shall be two percent per month, equaling an annual percentage rate of twenty-four percent.
- If applicant pays any invoice with a check, and the check is returned from Applicant's bank unpaid for any reason, Applicant will pay a service charge of thirty-five dollars or one half of one percent of the face amount of the check, whichever, is greater. The service charge will be along with any late charges that may be applicable.
- Applicant agrees that for any merchandise to be returned, if approved by Aetna, applicant will incur a restocking charge and further responsibility for shipping and handling charges.
- This agreement shall be a continuing agreement and shall apply to each purchase of merchandise. Applicant agrees that Aetna can change or amend any of the terms of this Agreement. Applicant's continued use of the commercial charge account after the effective date of the amendment or change shall be deemed acceptance of the changed terms.
- Applicant may terminate this Agreement at will at any time by written notice to Aetna. Such termination to be effective following the receipt of the notice. Termination of this Agreement shall result in all subsequent purchases to be shipped on a prepaid basis only.
- Applicant agrees to hold harmless Aetna Plywood, Inc. for any damages resulting from the withholding and/or delaying of the shipment of merchandise to applicant resulting from events outside the control of Aetna Plywood, Inc.
- Applicant understands and agrees that Aetna's liability of damages as a result of a failure of any product shall be limited to the cost of the replacement of the goods supplied, and Aetna shall not be liable for any incidental or consequential damages arising therefrom.
- Applicant agrees to submit to the jurisdiction of the Circuit Court of Cook County, Illinois.
- Applicant and Aetna hereby waive the right to a jury trial for any claim arising from the enforcement of this agreement.
- Applicant will pay all expenses, including reasonable attorneys' fees, incurred by Aetna in the enforcement of the agreement and the collection of any charges due thereunder.
- Aetna's failure to exercise any of its rights hereunder shall not be deemed a waiver of Aetna's rights under this agreement.

The applicant, whose signature appears below, ("Applicant") hereby authorizes Aetna to request and to obtain credit information from Applicant's trade, bank and personal references. Applicant authorizes the references contacted by Aetna to release to Aetna the information concerning the status and conduct of the Applicant's business and personal credit. Applicant states that they have read all the terms and conditions stated on page 1 and page 2 of this form. Applicant agrees that those terms and conditions govern this application for an account.

**Applicant's signature:** ✓ \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

# Certificate of Exemption

**Purchaser:** Complete this certificate and **give it to the seller.**

**Seller:** If this certificate is not fully completed, you must charge sales tax. Keep this certificate as part of your records.

This is a blanket certificate, unless one of the boxes below is checked, and remains in force as long as the purchaser continues making purchases, or until otherwise cancelled by the purchaser.

Check if this certificate is for a single purchase and enter the related invoice/purchase order # \_\_\_\_\_.

If you are a contractor and have a purchasing agent agreement with an exempt organization, check the box to make multiple purchases for a specific job. Enter the exempt entity name and specific project:

Exempt entity name \_\_\_\_\_ Project description \_\_\_\_\_

Type or print	Name of purchaser _____			
	Business address _____		City _____	State _____ Zip code _____
	Purchaser's tax ID number _____		State of issue _____	
	If no tax ID number, enter one of the following:	FEIN	Driver's license number/State issued ID number	
			state of issue	number
	Name of seller from whom you are purchasing, leasing or renting _____			
Seller's address _____		City _____	State _____ Zip code _____	

**Type of business.**

Type of business	<input type="checkbox"/> 01 Accommodation and food services	<input type="checkbox"/> 11 Transportation and warehousing
	<input type="checkbox"/> 02 Agricultural, forestry, fishing, hunting	<input type="checkbox"/> 12 Utilities
	<input type="checkbox"/> 03 Construction	<input type="checkbox"/> 13 Wholesale trade
	<input type="checkbox"/> 04 Finance and insurance	<input type="checkbox"/> 14 Business services
	<input type="checkbox"/> 05 Information, publishing and communications	<input type="checkbox"/> 15 Professional services
	<input type="checkbox"/> 06 Manufacturing	<input type="checkbox"/> 16 Education and health-care services
	<input type="checkbox"/> 07 Mining	<input type="checkbox"/> 17 Nonprofit organization
	<input type="checkbox"/> 08 Real estate	<input type="checkbox"/> 18 Government
	<input type="checkbox"/> 09 Rental and leasing	<input type="checkbox"/> 19 Not a business (explain) _____
	<input type="checkbox"/> 10 Retail trade	<input type="checkbox"/> 20 Other (explain) _____

**Reason for exemption.**

Reason for exemption	<input type="checkbox"/> A Federal government (department) _____	<input type="checkbox"/> J Agricultural production
	<input type="checkbox"/> B Specific government exemption (from list on back) _____	<input type="checkbox"/> K Industrial production/manufacturing
	<input type="checkbox"/> C Tribal government (name) _____	<input type="checkbox"/> L Direct pay authorization
	<input type="checkbox"/> D Foreign diplomat # _____	<input type="checkbox"/> M Multiple points of use (services, digital goods, or computer software delivered electronically)
	<input type="checkbox"/> E Charitable organization # _____	<input type="checkbox"/> N Direct mail
	<input type="checkbox"/> F Educational organization # _____	<input type="checkbox"/> O Other (enter number from back page) _____
	<input type="checkbox"/> G Religious organization # _____	<input type="checkbox"/> P Percentage exemption
	<input type="checkbox"/> H Resale	<input type="checkbox"/> Advertising (enter percentage) _____%
	<input type="checkbox"/> I Capital Equipment	<input type="checkbox"/> Utilities (enter percentage) _____%
		<input type="checkbox"/> Electricity (enter percentage) _____%

*I declare that the information on this certificate is correct and complete to the best of my knowledge and belief. (PENALTY: If you try to evade paying sales tax by using an exemption certificate for items or services that will be used for purposes other than those being claimed, you may be fined \$100 under Minnesota law for each transaction for which the certificate is used.)*

Sign here	Signature of authorized purchaser _____	Print name here _____	Title _____	Date _____
	_____			

# WISCONSIN SALES AND USE TAX EXEMPTION CERTIFICATE

Check One  Single Purchase  Continuous

Purchaser's Business Name	Purchaser's Address
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The above purchaser, whose signature appears on the reverse side of this form, claims exemption from Wisconsin state, county, baseball or football stadium, local exposition, and premier resort sales or use tax on the purchase, lease, license, or rental of tangible personal property, property under sec. 77.52(1)(b), items under sec. 77.52(1)(c), goods under sec. 77.52(1)(d), or taxable services, as indicated by the box(es) checked below.

I hereby certify that I am engaged in the business of selling, leasing, licensing, or renting: \_\_\_\_\_

*(Purchaser's description of property, items, goods, or services sold by purchaser.)*

Purchaser's description of property or services purchased (itemize property, items, or goods purchased if "single purchase"):

Seller's Name	Seller's Address
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## REASON FOR EXEMPTION

**Resale** (Enter purchaser's seller's permit or use tax certificate number) \_\_\_\_\_

### Manufacturing and Biotechnology

- Tangible personal property (TPP) or item under s.77.52(1)(b) that is used exclusively and directly by a manufacturer in manufacturing an article of TPP or items or property under s.77.52(1)(b) or (c) that is destined for sale and that becomes an ingredient or component part of the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale or is consumed or destroyed or loses its identity in manufacturing the article of TPP or items or property under s.77.52(1)(b) or (c) destined for sale.
- Machines and specific processing equipment and repair parts or replacements thereof, exclusively and directly used by a manufacturer in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) and safety attachments for those machines and equipment.
- The repair, service, alteration, fitting, cleaning, painting, coating, towing, inspection, and maintenance of machines and specific processing equipment, that the above purchaser would be authorized to purchase without sales or use tax, at the time the service is performed. Tools used to repair exempt machines are not exempt.
- Fuel and electricity consumed in manufacturing tangible personal property or items or property under s.77.52(1)(b) or (c) in this state.  
Percent of fuel exempt: \_\_\_\_\_ %                      Percent of electricity exempt: \_\_\_\_\_ %
- Portion of the amount of fuel converted to steam for purposes of resale. Percent of fuel exempt: \_\_\_\_\_ %
- Property used exclusively and directly in qualified research, by persons engaged in manufacturing at a building assessed under s. 70.995, by persons engaged primarily in biotechnology in Wisconsin, or a combined group member conducting qualified research for another combined group member that meets these requirements.

### Farming (To qualify for this exemption, the purchaser must use item(s) exclusively and directly in the business of farming, including dairy farming, agriculture, horticulture, floriculture, silviculture, or custom farming services.)

- Tractors (except lawn and garden tractors), all-terrain vehicles (ATV) and farm machines, including accessories, attachments, and parts, lubricants, nonpowered equipment, and other tangible personal property or items or property under s.77.52(1)(b) or (c) that are used exclusively and directly, or are consumed or lose their identities in the business of farming. This includes services to the property and items above.
- Feed, seeds for planting, plants, fertilizer, soil conditioners, sprays, pesticides, and fungicides.
- Breeding and other livestock, poultry, and farm work stock.
- Containers for fruits, vegetables, grain, hay, and silage (including containers used to transfer merchandise to customers), and plastic bags, sleeves, and sheeting used to store or cover hay and silage. Baling twine and baling wire.
- Animal waste containers or component parts thereof (may only mark certificate as "Single Purchase").
- Animal bedding, medicine for farm livestock, and milk house supplies.

**Governmental Units and Other Exempt Entities**

Enter CES No., if applicable

- The United States and its unincorporated agencies and instrumentalities.
- Any federally recognized American Indian tribe or band in this state.
- Wisconsin state and local governmental units, including the State of Wisconsin or any agency thereof, Wisconsin counties, cities, villages, or towns, and Wisconsin public schools, school districts, universities, or technical college districts.
- Organizations organized and operated exclusively for religious, charitable, scientific, or educational purposes, or for the prevention of cruelty to children or animals. CES Number \_\_\_\_\_ (Required for Wisconsin organizations).

**Other**

- Containers and other packaging, packing, and shipping materials, used to transfer merchandise to customers of the purchaser.
- Trailers and accessories, attachments, parts, supplies, materials, and service for motor trucks, tractors, and trailers which are used exclusively in common or contract carriage under LC, IC, or MC No. (if applicable) \_\_\_\_\_.
- Machines and specific processing equipment used exclusively and directly in a fertilizer blending, feed milling, or grain drying operation, including repair parts, replacements, and safety attachments.
- Building materials acquired solely for and used solely in the construction or repair of holding structures used for weighing and dropping feed or fertilizer ingredients into a mixer or for storage of such grain, if such structures are used in a fertilizer blending, feed milling, or grain drying operation.
- Tangible personal property purchased by a person who is licensed to operate a commercial radio or television station in Wisconsin, if the property is used exclusively and directly in the origination or integration of various sources of program material for commercial radio or television transmissions that are generally available to the public free of charge without a subscription or service agreement.
- Fuel and electricity consumed in the origination or integration of various sources of program material for commercial radio or television transmissions that are generally available to the public free of charge without a subscription or service agreement.  
Percent of fuel exempt: \_\_\_\_\_ %      Percent of electricity exempt: \_\_\_\_\_ %
- Tangible personal property and items, property and goods under s.77.52(1)(b), (c), and (d) to be resold by \_\_\_\_\_ on my behalf where \_\_\_\_\_ is registered to collect and remit sales tax to the Department of Revenue on such sales.
- Tangible personal property, property, items and goods under s.77.52(1)(b), (c), and (d), or services purchased by a Native American with enrollment # \_\_\_\_\_, who is enrolled with and resides on the \_\_\_\_\_ Reservation, where buyer will take possession of such property, items, goods, or services.
- Tangible personal property and items and property under s.77.52(1)(b) and (c) becoming a component of an industrial or municipal waste treatment facility, including replacement parts, chemicals, and supplies used or consumed in operating the facility. Caution: Do not check the "continuous" box at the top of page 1.
- Portion of the amount of electricity or natural gas used or consumed in an industrial waste treatment facility.  
(Percent of electricity or natural gas exempt \_\_\_\_\_ %)
- Electricity, natural gas, fuel oil, propane, coal, steam, corn, and wood (including wood pellets which are 100% wood) used for fuel for **residential** or **farm** use.
 

	% of Electricity Exempt	% of Natural Gas Exempt	% of Fuel Exempt
<input type="checkbox"/> Residential .....	_____ %	_____ %	_____ %
<input type="checkbox"/> Farm .....	_____ %	_____ %	_____ %
- Address Delivered: \_\_\_\_\_
- Percent of printed advertising material solely for out-of-state use. \_\_\_\_\_ %
- Catalogs, and the envelopes in which the catalogs are mailed, that are designed to advertise and promote the sale of merchandise or to advertise the services of individual business firms.
- Computers and servers used primarily to store copies of the product that are sent to a digital printer, a plate-making machine, or a printing press or are used primarily in prepress or postpress activities, by persons whose NAICS code is 323111, 323117, or 323120.
- Purchases from out-of-state sellers of tangible personal property that are temporarily stored, remain idle, and not used in this state and that are then delivered and used solely outside this state, by persons whose NAICS code is 323111, 323117, or 323120.
- Other purchases exempted by law. (State items and exemption). \_\_\_\_\_

**(DETACH AND PRESENT TO SELLER)**

*I hereby certify that if the item(s) being purchased are not used in an exempt manner, I will remit use tax on the purchase price at the time of first taxable use. I understand that failure to remit the use tax may result in a future liability that may include tax, interest, and penalty.*

Signature of Purchaser	Print or Type Name	Title	Date