



FAX TRANSMITTAL

P.O. Box 14468 Phoenix, AZ 85063
Phone (602) 272-6754 • Fax (602) 272-6797
www.beachproductsonline.com

To:			Date:	November 8, 2010
Firm Name:			From:	Amy Jensen
Project:			Total Pages:	4
Fax Number:			RE:	Credit Application & Tax Exemption

MEMO:

Thank you for your recent order with our company for the project referenced above. Our records do not show any current credit information for your company.

If you could please complete the attached forms and return them to our office as soon as possible. Be advised that ALL forms must be signed by an owner or officer of your company to be approved.

It is Beach Products' policy, pending credit approval, all customers are COD. Once credit has been approved, we will gladly set up an account for your company, our payment terms are NET 30 Days.

Due to the time it may take to execute your credit approval, the project referenced above will be processed as COD.

We look forward to having a successful business relationship with you. If you have any questions or concerns regarding this matter, please feel free to contact me.

****PLEASE MAKE SURE TO INCLUDE FAX NUMBERS FOR ALL REFERENCES, AS WELL AS FOR YOUR BANK****

Thank you,

Amy Jensen

Credit Department

BIKE RACKS & LOCKERS
ROOF HATCHES
SKYLIGHTS
ACCESS PANELS
OPERABLE WALLS
FOLDING PARTITIONS

CUB. TRACK & CURT.
TOILET PART. & ACC.
WALL & CORNER GRDS
FLAGPOLES
SIGNAGE
METAL LOCKERS

FIRE EXT. & CAB.
POSTAL SPECIALTIES
CHALK & TACK BOARDS
PROJECTION SCREENS
DARKROOM DOORS
ENTRANCE MATS



Application for Credit

To Avoid Any Delay in Processing, Complete In Full. All Information To Be Held In Confidence

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Contact Information

Legal Name: _____ A/P Contact: _____

Mailing Address: _____ Physical Address: _____

City, State: _____ Zip _____ City, State: _____ Zip _____

Phone Number: _____ Fax Number: _____ Email: _____

General Business Information

Type of Business: _____

AZ Registrar of Contractors License Number: _____

Legal Form Under Which Business Operates Individual Partnership LLC Corporation

Federal I.D./SSN: _____

Number of Years in Business: _____

Year of Inc _____ State of Inc _____

State Sales Tax

Are You Sales and/or Use Tax Exempt? Yes No

If Yes, Please Insert Your Certificate Number _____

Officer's Name _____ Title _____

Bank Reference

Bank Name: _____ Contact: _____

Address: _____ Phone: _____

City, State, Zip: _____ Fax: _____

Checking Acct. Number _____ Savings Acct. Number _____

Business Credit Reference (Minimum of Three)

Name	Address, City, State, Zip	Phone	Fax
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____

We certify that all the information on this form is correct, and that we fully understand your credit terms and agree to the proper payment of extended credit. Our terms are NET30.

Date: _____ Signed: _____

Printed Name: _____

Title: _____



Financial Institution Release

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To Whom it May Concern:

We authorize our financial institution listed below to release information to Beach Products for credit purposes on our account(s) listed below.

Thank you.

Authorized Signature: _____

Date: _____

Printed Name: _____

Title: _____

Financial Institution:

Fax: _____

RE: _____

Account(s): _____

The above company has applied for credit with our company. We would appreciate any information relating to credit you can provide.

Thank you.

Account: _____

Date Opened: _____

Average Balance: _____

Any Non-Sufficient Funds/Returned Checks: Yes No

If yes, number of times _____

Rating: Poor Average Good Excellent

Signed: _____

Date: _____

Printed Name: _____

Prime Contractor's Certificate Instructions

PURPOSE

Arizona statutes impose transaction privilege tax on entities engaged in the business of prime contracting. If an entity meets the definition of the term "contractor" on a given project, that entity is liable for transaction privilege tax as a prime contractor or has the burden of proving that it is not the prime contractor for that contracting project. Obtaining a completed Arizona Department of Revenue Prime Contractor's Certificate satisfies that burden of proof. However, the Department of Revenue has the discretion to disregard the Certificate if it is incomplete or erroneous.

GENERAL INSTRUCTIONS

In order to ensure the effectiveness of the Certificate, all required fields must be completed.

- A. The "NAME", "ADDRESS", and TRANSACTION PRIVILEGE LICENSE #" fields of the Prime Contractor section must be completed. The prime contractor is the entity responsible for the tax.
- B. The "NAME", and "ADDRESS", fields of the Subcontractor section must be complete.
- C. Either the "Single Project Certificate" box or the "Blanket Certificate" box of the Type of Certificate section must be checked.
 - If the Single Project Certificate box is checked, the "PROJECT DESCRIPTION" must be supplied. The project description must be sufficient to identify the location of the single project or the Certificate will be deemed incomplete by the Department of Revenue.
 - If the Blanket Certificate box is checked, either the "From: Through:" box or the "Until revoked" box must be checked. If the "From: Through:" box is checked, the "From: Through:" dates must be provided. The "Specific Exceptions" box is optional and allows the "Prime Contractor" to exclude Specific projects or time periods from the Blanket Certificate. If the "Specific Exceptions" is checked, details describing the excluded project(s) or the excluded time periods must be provided.
 - The "SIGNATURE" "TITLE", "PRINT NAME" and "DATE SIGNED" FIELDS of the Signature section must be completed.

Failure to complete these fields as specified may result in the Arizona Department of Revenue disregarding the incomplete Certificate.

RETROACTIVE EFFECT

If a Certificate is signed subsequent to the commencement or completion of a contracting project intended to be within the scope of the Certificate, the Department of Revenue will give retroactive effect to the Certificate for the intended project. However, *the Certificate will only be given retroactive effect for periods within 4 years of the execution date of the Certificate.* In the event that the "Blanket Certificate" box is checked and the "Until revoked" option is selected thereunder, in order to give a Certificate retroactive effect, the "Prime Contractor" must indicate, next to the "Until revoked" box, the effective date of the Blanket Certificate.

ASSUMPTION OF LIABILITY

In most instances, the entity assuming the prime contracting transaction privilege tax liability for the contracting project(s) referenced in the Certificate will legally be the prime contractor for such project(s). However, in some instances such entity may not legally be the prime contractor for such project(s). If an entity is NOT LEGALLY the prime contractor for such project(s), the Certificate will nevertheless be effective and will subject such entity to the transaction privilege tax liability of the entity shown as the "Subcontractor" on the Certificate if such "Subcontractor" IS LEGALLY the prime contractor.