



P.O. Box 90130  
719 Roble Road, Suite 103  
Allentown, PA 18109  
Ph: 888-480-3330  
Fx: 888-480-3334  
brushes@rsquality.com  
www.rsquality.com

Dear Valued Customer,

Thank you for your interest in working with R.S. Quality Products, Inc.! On behalf of the entire R.S. Quality Products staff, I'd like to take this opportunity to welcome you as a new customer. We pride ourselves on offering our customers responsive, competent and excellent service, along with the best color-coded cleaning tools and supplies on the market. Our customers are the most important part of our business, and we work tirelessly to ensure your satisfaction.

In order to keep accurate and detailed records, we need to learn a little about you as well. Enclosed you will find:

- Customer Information Form
- Our credit application, should you wish to be set up for terms
- ACH/EFT payment information (our preferred method of payment)
- Signed W9 form

Please take a moment to browse our website and check out the different products we have to offer, such as Best Sanitizers' surface sanitizers, color-coded lobby dustpans, or customizable shadow boards. You can sign up for our newsletter, follow us on LinkedIn, or read our blog posts to stay up to-date with new products and our company!

If you have any questions, or need additional paperwork filled out, please don't hesitate to contact me. Again, thank you for your interest and welcome to the R.S. Quality Products family!

Laura Ernst  
Director of Operations  
R.S. Quality Products, Inc.  
888-480-3330  
laura@rsquality.com



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### Customer Information Form

Business Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Ship To Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Main Phone #: \_\_\_\_\_

AP Contact: \_\_\_\_\_

AP Phone #: \_\_\_\_\_

AP Contact Email: \_\_\_\_\_

Please provide an email address where invoices can be sent (Preferred method of invoicing):

\_\_\_\_\_

Orders can be placed online, by phone, or by email using a valid credit card or a purchase order (once approved). We accept Visa, Mastercard, Discover or American Express.

If you are sales tax exempt, please provide a current sales tax exemption certificate.

If you have any questions, please do not hesitate to contact us.

Thank you,

Laura Ernst

Director of Operations

R.S. Quality Products, Inc.

[laura@rsquality.com](mailto:laura@rsquality.com)



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### Credit Application and Agreement

The following statements and representations are made for purposes of procuring commercial credit from R.S. Quality Products, Inc.

#### A. Applicant

Legal Business Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Ship to Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Sole Proprietorship  Partnership  Corporation/LLC

Name/Contact Information/SSN of the Sole Proprietor, Partners and/or LLC members:

Amount of Credit Requested: \$ \_\_\_\_\_ Type of Business \_\_\_\_\_

How Long in Business \_\_\_\_\_ Federal Tax No. \_\_\_\_\_ Sales Tax Exempt: Yes  No

#### B. Banking Information

Bank: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Officer/Contact: \_\_\_\_\_ Acct. No. \_\_\_\_\_ Type of Acct. \_\_\_\_\_

#### C. Trade References (Please fill out or attach a separate document)

1. Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

#### D. Credit Terms

This Agreement is not effective unless and until R.S. Quality Products, Inc. approves the Applicant for the extension of credit. In the event credit is extended, Applicant agrees as follows:

- The extension by R.S. Quality Products, Inc. of credit to Applicant and the amount and terms of such credit availability are in the sole, absolute, and exclusive discretion of R.S. Quality Products, Inc. R.S. Quality Products, Inc. reserves the right to terminate the extension of credit to Applicant at any time with or without notice and to change any of the terms and conditions thereof upon notice to the Applicant.
- All invoices are due Net 30.
- Applicant shall pay all costs and expenses (including reasonable attorney's fees) incurred by R.S. Quality Products, Inc. in collection of any outstanding balance.
- Applicant shall notify R.S. Quality Products, Inc. in writing at least 30 days prior to any change in Applicant's (1) ownership (2) business form/structure, (3) state of incorporation, or (4) principal place of business.



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- This Agreement is made under and shall be governed by the laws of the Commonwealth of Pennsylvania, exclusive of choice of law provisions. Any legal action or proceeding with respect to this Agreement shall be brought in the appropriate state or federal court of Lehigh County, Pennsylvania. Applicant hereby consents to jurisdiction in such courts and waives any objection to venue of any action or proceeding in any such court in Lehigh County.

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

Right to Request Specific Reasons for Credit Denial: If your application for credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain such statement, please contact R.S. Quality Products, Inc's credit manager at the above identified address within 60 days of the date you are notified of its decision. R.S. Quality Products, Inc. will send you a written statement of the reason(s) for the denial within 30 days of receiving your request for such statement.

CERTIFICATION: The Applicant certifies to the following: (1) all of the information provided in this Application is true and correct and provided for the purpose of obtaining credit; (2) this Application is for the extension of credit for business purposes only and not for the extension of credit for personal, family, or household purposes; (3) the undersigned is authorized to execute applications and other documents required to establish commercial credit accounts on behalf of the Applicant; (4) R.S. Quality Products, Inc. is authorized by Applicant to investigate and verify, on a periodic basis, any information provided in this Application and inquire of all references and customary credit information sources including customer credit repositories as to the creditworthiness of Applicant; (5) Applicant shall notify R.S. Quality Products, Inc. of any material change in name, ownership, location or legal status of Applicant within five days of such material change occurring; and (6) The undersigned has read, understands and agrees to all of the terms set forth in this Credit Application and Agreement.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

PERSONAL GUARANTEE (Only fill out this section if requesting a line of credit greater than \$20,000): For and in consideration of R.S. Quality Products, Inc. extending credit to the Applicant and with the understanding that without this Guarantee R.S. Quality Products, Inc. would not extend such credit, the undersigned Guarantor hereby personally guarantees the payment of any obligation of the Applicant to the R.S. Quality Products, Inc. and therefore Guarantor hereby agrees to pay to R.S. Quality Products, Inc. on demand, without offset, any and all sums due and payable to R.S. Quality Products, inc. by the Applicant if and when Applicant fails to pay such amount. Guarantor further agrees to pay to R.S. Quality Products, Inc. all costs of collecting such amounts, including reasonable attorney's fees. This Guarantee shall be a continuing and irrevocable guarantee for the indebtedness of the Applicant. Furthermore, Guarantor consents to and waives notice of any modification, amendment or extension of the credit agreement hereby guaranteed.

Guarantor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guarantor Printed Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_



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ACH Payment Information

**Remittance Address:**

P.O. Box 90130  
Allentown, PA 18109

**Warehouse Address:**

719 Roble Road, Suite 103  
Allentown, PA 18109

**Date of Incorporation:**

April 1, 1991

**Bank Information:**

Peoples Security Bank and Trust

2355 City Line Road  
Bethlehem, PA 18017  
Account: 0053301054  
Routing: 031311807  
Phone # 610-691-1202

EIN 23-2641995

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <div style="text-align: center; font-family: cursive;">B.S. QUALITY PRODUCTS</div>		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.		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) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
	<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) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.		
	5 Address (number, street, and apt. or suite no.) See instructions. <div style="text-align: center;">719 ROBLE RD, SUITE 103</div>		Requester's name and address (optional)
	6 City, state, and ZIP code <div style="text-align: center;">ALLENTOWN, PA 18109</div>		
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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>									
or									
<b>Employer identification number</b>									
2	3								

## 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 for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ <div style="font-family: cursive; font-size: 1.2em;">Adam Safir</div>	Date ▶ 1/10/2023
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## General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### 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, later.*