



Tri-State Crating & Pallet Co., Inc.
85 Fulton St. Paterson, NJ 07501
P: 973-357-8293 | F: 973-357-8296
www.tristatecrating.com

A “CRATE” SOURCE FOR ALL YOUR PACKAGING NEEDS!

Dear Customer,

Welcome to the Tri-State Crating! We thank you for giving us the opportunity to help you with your packaging needs and look forward to working with you!

Here’s a little more about us: We are a 3rd generation family owned and operated company with over 50 years of experience in custom crating. Over the many years of business, we continue to solve the most sensitive and challenging jobs you may think of.

Our goal is to provide you with on time, quality crates at a competitive price. Customer satisfaction is our #1 priority and we will aim to exceed your expectations every time!

Enclosed you will find our WELCOME packet to help you take advantage of our products and services. We strive to be your #1 choice for packing, crating, and shipping services!

Here are some of the products we offer:

- Custom Boxes
- Military Crates
- Bases & Skids
- Trade Show Boxes
- Domestic & Export
- Pallets—new & used

Here are some of the services we offer:

- Design Services
- Machinery Pick-up
- Rigging & Loading
- Trucking & Freight
- On-Site Packing
- Warehousing

...and much more. If it’s not listed here, just ask us! Feel free to call or email with any questions or concerns. We look forward to doing business with you and growing together!

Best regards,

The Tri-State Team



Tri-State Crating & Pallet Co., Inc.
 85 Fulton St. Paterson, NJ 07501
 P: 973-357-8293 I F: 973-357-8296
www.tristatecrating.com

BUSINESS ACCOUNT CREDIT APPLICATION

GENERAL BUSINESS INFORMATION (Kindly complete all fields)	
Trade Name (Operating As): _____	Type of Business: _____
Tax ID: _____	D & B: _____
Years in Business: _____	Credit Line Req: _____
Accounts Payable Contact Name: _____	Accounts Payable Ph: _____ Email: _____
Tax Classification: <input type="checkbox"/> Sole Proprietorship/LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other	

BILLING & SHIPPING INFO (Electronic Dispatch System Coming Soon!)	
Bill to Co. Name: _____	Ship to Co. Name: _____
Main Contact: _____	Shipping Contact: _____
	Shipping Hours: _____
Street Address: _____	Street Address: _____
City: State: Zip:	City: State: Zip:
Ph: _____	Ph: _____
Email: _____	Email: _____
Electronic Invoices: <input type="checkbox"/> Yes <input type="checkbox"/> No	

BANK & CREDIT INFORMATION	
Name of Bank: _____	Name of Bank: _____
Street Address: _____	Street Address: _____
City: State: Zip:	City: State: Zip:
Contact Name: _____	Contact Name: _____
Ph: _____	Ph: _____
Type of Account: <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other Account #: _____	Type of Account: <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other Account #: _____

Continued 2nd pg.

Please submit all applications to paul@tristatecrating.com



Tri-State Crating & Pallet Co., Inc.
 85 Fulton St. Paterson, NJ 07501
 P: 973-357-8293 | F: 973-357-8296
www.tristatecrating.com

BUSINESS TRADE REFERNCES

BUSINESS TRADE REFERENCE # 1	
Company Name: _____	Contact Name: _____
Street Address: _____	Ph: _____
City: _____ State: _____ Zip: _____	Fax: _____
	Email: _____

BUSINESS TRADE REFERENCE # 2	
Company Name: _____	Contact Name: _____
Street Address: _____	Ph: _____
City: _____ State: _____ Zip: _____	Fax: _____
	Email: _____

BUSINESS TRADE REFERENCE # 3	
Company Name: _____	Contact Name: _____
Street Address: _____	Ph: _____
City: _____ State: _____ Zip: _____	Fax: _____
	Email: _____

AGREEMENT

All invoices must be paid 30 days from the date of the invoice. If it becomes necessary for your account to be placed in hands of an attorney or collection agency, the purchaser will pay any and all costs of collections, including, but not limited to, reasonable attorney fees and court costs necessary to collect the past due balance.

By submitting this application, you authorize Tri- State Crating & Pallet Co. to make inquiries into the banking and business/trade references that you have supplied. Please make sure all info is filled in as we fax/email your references.

I certify that the information provided on this application is true and correct.

Signature

Date

Printed Name

Date

Please submit all applications to paul@tristatecrating.com




Tri-State Crating & Pallet Co., Inc.
 85 Fulton St. Paterson, NJ 07501
 P: 973-357-8293 | F: 973-357-8296
www.tristatecrating.com

YOU HAVE OPTIONS!!!

CHECK	CREDIT CARDS	ACH/WIRE
<p>Mail us a check</p> 	<p>3% Fee for all credit cards</p> 	<p>See wire instructions</p> 

We're here to make your experience with *Tri-State Crating & Pallet Co., Inc.* amazing!
 We like to make things as simple as possible for you; since we know how busy you are.
 We'll always be happy to help you along the way to make sure you are completely satisfied!

REMEMBER TO ASK ABOUT...

- ❖ Automatic Payments (avoid late fees)
- ❖ Having invoices emailed to you instead of mailed 
- ❖ Pay early to get a discount (Must be approved during account set up)

Treat yourself...



Invite YOUR friends



Your friends make a purchase*



YOU get a gift card

* Purchase must be \$1,500 or more to qualify for gift card*



Tri-State Crating & Pallet Co., Inc.
85 Fulton St. Paterson, NJ 07501
P: 973-357-8293 | F: 973-357-8296
www.tristatecrating.com

CREDIT CARD AUTHORIZATION FORM

I, _____ from _____
(Name of Authorized Person) *(Company/Organization)*

hereby authorize **Tri-State Crating & Pallet Co., Inc.** to process the credit card information provided below in the amount of \$ _____.



CARD HOLDER'S NAME: _____
(as it appears on the card)

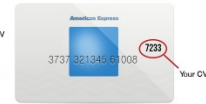
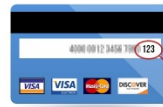
BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CREDIT CARD NUMBER: _____

EXPIRATION DATE (MM/YY) ____ / ____ CCV SECURITY CODE: _____

Thank you for your payment!



Please note: Effective 5/1/14: There will be a 3% convenience fee for all credit card transactions

I, the undersigned, agree to all the conditions set forth in this credit card authorization.

Signature of Cardholder

Date

Email Address for Receipt



Tri-State Crating & Pallet Co., Inc.
85 Fulton St. Paterson, NJ 07501
P: 973-357-8293 | F: 973-357-8296
www.tristatecrating.com

CHANGE IS GOOD! G PAPERLESS

Each year we could save:



30 million
pieces of paper



1,500
trees



90 million gallons
of water**

We are always looking for ways to save time and money; while saving our planet!!!



SAVE TIME

Get your invoices right away &
never worry about looking them



SAVE SPACE

Dump those cabinets & have
access to invoices at your fingertips



SAVE MONEY

Everyone loves saving money!
Forget the stamps....

READY TO START SAVING?

Call us today and let us know you are ready to switch.
Just provide us with your email address and you are ready!

Yes, sign us up for paperless billing.

Email address: _____

No, we would not like to participate in paperless billing.

You can mail this back with your next payment, or email for set up: Jazzy@tristatecrating.com



Request for Taxpayer Identification Number and Certification

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

▶ Go to 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. Tri-State Crating & Pallet Co., Inc.	
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 one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input 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) ▶ _____ <small>Note: 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 not 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.</small> <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) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 85 Fulton St.	Requester's name and address (optional)
6 City, state, and ZIP code Paterson, NJ 07501	
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.

Social security number									
or									
Employer identification number									
2	2	-	3	8	4	0	7	7	4

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.

Sign Here	Signature of U.S. person ▶ <i>Maria Ellison</i>	Date ▶ 1/1/19
------------------	---	----------------------

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.

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.