



Please complete in full, sign on page 2 and return by fax or email to:

Fax (309) 820-9744
deb.mcclure@holtsupply.com
joey.lang@holtsupply.com

PO Box 1365
Bloomington, IL
61702-1365
(Tel) 309-820-0566

Credit Application

Date: _____

Business Name _____ Phone _____ Fax _____

Business Street Address/PO Box or RR _____

City/County/State/Zip _____

Home Office Street Address/PO Box or RR _____

City/County/State/Zip _____

Customer E-mail Address _____

e-mail Invoices to _____ Monthly Statement Yes [] No []

Bank Reference Name _____

Bank Officer _____ Phone _____

Address/City/State/Zip _____

Tax Exempt [] Yes [] No [] Sales Tax Exemption Number _____

*(If yes: attached is your State's sales tax exemption certificate. This form must be completed in full, signed, and returned with a copy of your company's registration license.)

Type of Ownership [] Proprietorship [] Partnership [] Corporation LLC

Number of years in business _____ FEIN Number _____

Holt Supply Company location you will frequent most:

- [] Bloomington [] Burlington [] Champaign
[] Galesburg [] Sioux Falls

Type of Business:

- [] Contractor: Plumbing [] Retail Store: Hardware, Appliances
[] Contractor: Plumbing, Heating, Cooling, HVAC Service [] Apartment House Maintenance
*(Copy of Refrigerant Certificate required)
[] Industrial Account, Manufacturing [] Government Agency
[] Other (please specify) [] Building Contractor

Purchase Order Required [] Yes [] No Shipping Tickets Prices [] Yes [] No

Contact Regarding Material, Returns _____ Phone _____

e-mail: _____

Contact Regarding Payables _____ Phone _____

e-mail: _____

Principal Suppliers with whom you have established credit

Name _____ Phone _____
Street Address/City/State/Zip _____ Fax _____
Email Address _____
Name _____ Phone _____
Street Address/City/State/Zip _____ Fax _____
Email Address _____
Name _____ Phone _____
Street Address/City/State/Zip _____ Fax _____
Email Address _____
Name _____ Phone _____
Street Address/City/State/Zip _____ Fax _____
Email Address _____

Principal Owner(s); Partners or Officers

Name _____ SS# _____ Title _____
Name _____ SS# _____ Title _____
Name _____ SS# _____ Title _____

All Purchases become due and payable on the 15th of the month following the invoice date or on specific terms designated on the invoice. Any invoice not paid within the terms will be considered past due. Purchaser agrees to pay a service charge of 2% per month (24% annually) on all balances past due. The undersigned personally guarantees all obligations to your company or companies extended as a result of this application for credit and it is hereby agreed, that if such account is placed in the hands of an attorney or is collected by suit, or through probate proceedings, promises to pay the principal and interest then due plus reasonable attorney’s fees and collection fees together with all costs of court.

Signed (individually) _____
Signed (individually) _____

Certificate of Resale

The undersigned hereby certifies that all tangible personal property hereafter purchased by him is for purposes of resale, and assumes liability for payment of Retailers’ Occupation Tax with respect to receipts from the resale of this property to users or consumers. This certificate shall be considered a part of each order which we shall give, unless such order otherwise specifies.

Firm Name _____ Date _____

G][bUhi fY`cZDi fWUgYf#5i h\cf]nYX`5[Ybh_____

1-29—012-089
Certificate of Registration
Holt Supply Number

Certificate of Registration
Number of Purchaser

OFFICE USE ONLY
HSC Location Submitting App 1 2 3 5 7 8 9 10
Salesman Code _____
SPS # _____
Holt Supply Contact _____

This document is to be completed by a purchaser when claiming exemption from sales/use tax. Certificates are valid for up to three years.

Purchaser Name _____

Seller Name _____

Address _____

Address _____

City _____ State _____ ZIP _____

City _____ State _____ ZIP _____

General Nature of Business _____

Telephone Number _____

Purchaser is doing business as:

Retailer

Sales Tax Permit Number (if required) _____

Retailer Car Dealer

Enter your DOT number _____

Governmental Agency (including public schools)

Wholesaler Farmer Lessor

Manufacturer Nonprofit Hospital

Private Nonprofit Educational Institution

Qualifying Residential Care Facility

Nonprofit Museum

Other _____

Purchaser is claiming exemption for the following reason:

Resale Leasing Processing

Qualifying Farm Machinery/Equipment

Qualifying Farm Replacement Parts

Qualifying Manufacturing Machinery/Equipment

Research and Development Equipment

Pollution Control Equipment

Recycling Equipment

Qualifying Computer

Qualifying Replacement Parts/Supplies
(Manufacturing, R&D, Pollution Control, Recycling,
Computer)

Direct Pay (permit number required) _____

Other _____

Description of Purchase (Attach additional information if necessary) _____

Under penalty of perjury, I swear or affirm that the information on this form is true and correct.

Signature of Purchaser _____ Title _____ Date ____/____/____

Seller: Keep this certificate in your files.

Purchaser: Keep a copy of this certificate for your records.

Do not send to the Iowa Department of Revenue.

Instructions

This exemption certificate is to be completed by the purchaser claiming exemption from tax and given to the seller. The seller must retain this certificate as proof that exemption has been properly claimed. The certificate must be complete to be accepted by the seller. The seller can accept an exemption certificate only on property that is qualified (see the exemptions below) or based on the nature of the buyer. If property or services purchased for resale or processing are used or disposed of by the purchaser in a nonexempt manner, the purchaser is then responsible for the tax.

General Information about Exemptions

Resale: Any person in the business of selling who is purchasing items to resell may claim this exemption. **The purchaser can be acting as either a retailer or wholesaler and may not be required to have a sales tax permit.** Retailers with a sales tax permit number must enter it in the space provided.

Processing: Exempt purchases for processing include tangible personal property which by means of fabrication, compounding, manufacturing, or germination becomes an integral part of other tangible personal property ultimately sold at retail; chemicals, solvents, sorbents, or reagents used, consumed, dissipated, or depleted in processing personal property intended to be sold ultimately at retail, and chemicals used in the production of free newspapers and shoppers guides. **NOTE:** To claim an exemption for fuel used to create heat, power, or steam for processing or for fuel used to generate electric current, use Iowa Sales Tax Exemption Certificate, Energy used in Processing or Agriculture.

Qualifying Farm Machinery/Equipment: The item must be one of the following:

1. A self-propelled implement directly and primarily used in agricultural production, such as a tractor.
2. An implement directly and primarily used in agricultural production that is customarily drawn or attached to a self-propelled implement in the performance of its function, such as a plow.
3. A grain dryer (heater and blower only) directly and primarily used in agricultural production.
4. A snow blower, rear-mounted or front-mounted blade, or rotary cutter used in agricultural production, if attached to or towed by a self-propelled implement.
5. A diesel fuel trailer, seed tender, all-terrain vehicle, or off-road utility vehicle primarily used in agricultural production.
6. Tangible personal property that does not become a part of real property and is directly and primarily used in livestock or dairy production, aquaculture production, or the production of flowering, ornamental, or vegetable plants.
7. Auger systems, curtains, curtain systems, drip systems, fans, and fan systems, shutters, inlets, shutter or inlet systems, and refrigerators used in livestock or dairy production, aquaculture production, or the production of flowering, ornamental, or vegetable plants.
8. An auxiliary attachment improving safety, performance, operation, or efficiency for items 1 through 7.
9. A replacement part for items 1 through 8.
10. A container, label, carton, pallet, packing case, wrapping, baling wire, twine, bag, bottle, shipping case, or other similar item used in agricultural, livestock, or dairy production.

Qualifying Manufacturing Machinery/Equipment: The item must be computers, machinery, equipment, replacement parts, supplies, or material used to construct or self-construct computers, machinery, equipment, replacement parts, or supplies used for one of the following purposes:

1. Directly and primarily used in processing by a manufacturer.
2. Directly and primarily used to maintain integrity or unique environmental conditions for the product.
3. Directly and primarily used in research and development of new products or processes.
4. Directly and primarily used in recycling or reprocessing of waste products.

Pollution Control Equipment: The equipment must be used by a manufacturer primarily to reduce, control, or eliminate air or water pollution.

Qualifying Computers: The computers must be used in processing or storage of data or information by an insurance company, financial institution, or commercial enterprise.

Direct Pay: Businesses and individuals who pay their taxes directly to the Department rather than to the seller **must** enter their Direct Pay permit number in the space provided.

Private Nonprofit Educational Institutions: Purchases made by Iowa private nonprofit educational institutions used for educational purposes are exempt.

NOT EXEMPT from sales tax are purchases by most other private nonprofit organizations such as churches, fraternal organizations, clubs, etc., for use by those organizations.

For more information about sales tax exemptions, see the Department's website (<https://tax.iowa.gov>).