

COLUMBIACONTAINER

Customer Account Profile

Please send all orders to orders@columbiacontainer.net

Please send all quotes to quotes@columbiacontainer.net

Billing Information

Company Name:

CORP. PTNSHP PROP LLC

Address:

Phone Number: () - x Fax Number: () -

Accounts Payable Contact Name:

Email address for invoices:

Date Business Established:

Type of Business: DUNS#:

Bank Reference

Name:

Address:

Phone Number: () - x

Account Number:

Payment Information

Preferred Payment Method: Check Wire ACH Credit Card (2% processing fee)

Account Title: **Columbia Manufacturing Corp.** Account#: **5500353606**

Bank Routing-Wire #**031000053** Bank Routing-ACH & Checks#**054000030**

Bank Address: PNC Bank, N.A 249 Fifth Avenue Pittsburgh, PA 15222

For Remittance Advice please email Carol Carvella: ccarvella@columbiacontainer.net

Trade References

Company Name: Account#:

Address:

Contact Name: Email Address:

Phone Number: () - x Fax Number: () -

Company Name: Account#:

Address:

Contact Name: Email Address:

Phone Number: () - x Fax Number: () -

Company Name: Account#:

Address:

Contact Name: Email Address:

Phone Number: () - x Fax Number: () -

COLUMBIACONTAINER

Shipping Information

Company Name:

Address:

Phone Number: () - x Contact Name:

Email Address for Delivery Notification:

Receiving Hours: to Call before Delivery: Yes No

Accept Tractor Trailer: Yes No (Straight Truck Only)

Unit Height Restrictions: Yes No; If Yes, Max Height allowed per unit:

Pallet Jack Needed for Delivery: Yes No

Loading Dock: Yes No

Please check which configuration you would like your orders delivered to you.

P1 (1 unit per pallet) Yes No If yes, can we double stack the pallets? Yes No

P2 (2 units per pallet) Yes No

U (unitize-No Pallet) Yes No

Rack System: Yes No Case Erector: Yes No

Special Delivery Instructions:

COLUMBIA CONTAINER

UNIFORM SALES & USE TAX EXEMPTION/RESALE CERTIFICATE — MULTIJURISDICTION

The below-listed states have indicated that this certificate is acceptable as a resale/exemption certificate for sales and use tax, subject to the notes on pages 2—4. The issuer and the recipient have the responsibility to determine the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: **COLUMBIA CONTAINER CORP**
4311 Erdman Avenue
Baltimore, MD 21213

I certify that:

Name of Firm (Buyer): _____

Address: _____

is engaged as a registered

Wholesaler

Retailer

Manufacturer

Seller (California)

Lessor

Other (Specify) _____

and is registered with the below-listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, or ingredients or components of a new product or service to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) selling (California) the following:

Description of Business: _____

General description of tangible property or taxable services to be purchased from the Seller:

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL ¹		MO ¹⁶	
AR		NE ¹⁷	
AZ ²		NV	
CA ³		NJ	
CO ⁴		NM ^{4,18}	
CT ⁵		NC ¹⁹	
DC ⁶		ND	
FL ⁷		OH ²⁰	
GA ⁸		OK ²¹	
HI ^{4,9}		PA ²²	
ID		RI ²³	
IL ^{4,10}		SC	
IA		SD ²⁴	
KS		TN	
KY ¹¹		TX ²⁵	
ME ¹²		UT	
MD ¹³		VT	
MI ¹⁴		WA ²⁶	
MN ¹⁵		WI ²⁷	

I further certify that if any property or service so purchased tax free is used or consumed as to make it subject to a Sales or Use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform the Seller for added tax billing. This certificate shall be a part of each order that we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by thee city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: _____
(Owner, Partner, or Corporate Officer, or other authorized signer)

Title: _____

Date: _____