

A photograph of a large industrial distillation unit with multiple levels, pipes, and ladders. A large pink diagonal overlay covers the left side of the image. The text 'A-GAS' is prominently displayed in white on the pink background.

**A-GAS<sup>®</sup>**

TOGETHER WE CAN

**NEW ACCOUNT  
ONBOARDING**

# Welcome!

Thank you for choosing A-Gas as your next business partner. To get you set up and/or update your account in our systems, please fill out the appropriate documents in this packet, and provide any supporting documentation as requested.

## REQUIRED Documents

### Vendors

- Completed **W-9** (*required for payment*)

### Customers

- Copy of your **Tax-Exempt Form** (*if applicable*)

Completed forms & documents should be emailed to  
**accounting@agas.com**

Our Terms & Conditions can be found on our website: <https://www.agas.com/us/terms-conditions/>. Please read them and print a copy for your records.

## NEW ACCOUNT INFORMATION

A-Gas must receive this form and copies of required documents as notated below. No product will ship, nor payment issued until required documents are submitted. This information will be used for government reporting and compliance.

BUSINESS INFORMATION	
Business Name	Date Business Commenced
Owner's Name	Company Website
Phone   Fax	Customer Type
E-Mail	
Physical Address (City, State, Zip)	Billing Address for invoices (City, State, Zip)
Business Contact	Phone
Title	E-Mail

VENDOR INFORMATION	
AR Contact	Title
AR Phone	AR E-Mail
<b>ACH (Preferred Payment Method)</b> - To receive payments via ACH, please complete banking information.	
Financial Institution	ABA/ Routing #
Account Number	Swift Code
<b>Check</b> - To receive check payments please provide the remittance address.	Remit To Address for Payments (City, State, Zip)

A-Gas US Inc.'s payment terms are Net 30 or Net 45 days. A-Gas US Inc.'s authorized personnel must approve all other terms.

CUSTOMER INFORMATION	
AP Contact	<i>*Please note AP Email will receive electronic invoices.</i>
AP Phone	AP E-Mail
Credit Account (NET 30 Terms) <b>Please complete credit information and supply trade references – Page 4</b>	Dun & Bradstreet #
	Amount of Credit requested
For credit card and advance payments, please email <a href="mailto:ar@aggas.com">ar@aggas.com</a> or call (419) 867-8990 extension 2147.	

### Tax Exempt Status

Our company is tax exempt (**A copy of your tax exempt form is required with this document**)

Our Company is NOT tax exempt and should be charged applicable taxes on sales/services.



BUSINESS/TRADE REFERENCES	
Company Name	Type of Account
Address (City, State, Zip)	Phone
	E-Mail
Company Name	Type of Account
Address (City, State, Zip)	Phone
	E-Mail
Company Name	Type of Account
Address (City, State, Zip)	Phone
	E-Mail

## AGREEMENTS

1. Seller will invoice customer upon shipment and payment terms will be stipulated on each invoice.
2. Customer represents that the above information is true and is given to induce A-Gas to extend credit to the above named company.
3. Customer authorizes A-Gas to make such credit investigation as it sees fit, including contacting the above trade references and bank reference and obtaining credit reports.
4. Customer authorizes all trade references, banks, and credit reporting agencies to disclose to A-Gas any and all information concerning the financial and credit history of the above named company

*\*Unless specifically documented, A-Gas retains the rights, ownership, and title to any and all environmental benefits and attributes for the reclaimed gas that is purchased or sold by A-Gas and any gas that is acquired and caused to be destroyed by A-Gas.*

SIGNATURES	
Authorized Signature	Printed Name
Date	Title

**Request for Taxpayer  
Identification Number and Certification**

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

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

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<b>1</b> Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	<b>2</b> Business name/disregarded entity name, if different from above.	
	<b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . <b>Note:</b> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____  (Applies to accounts maintained outside the United States.)
	<b>3b</b> If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . <input type="checkbox"/>	
	<b>5</b> Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	<b>6</b> City, state, and ZIP code	
	<b>7</b> 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. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>											
				-				-			
<b>or</b>											
<b>Employer identification number</b>											
					-						

**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	Date
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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).

**What's New**

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

I have read and agree to the Terms and Conditions outlined on <https://www.agas.com/us/terms-conditions/>

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date