

WÜRTH INDUSTRY OF NORTH AMERICA (WINA) NEW SUPPLIER APPROVAL FORM (DOMESTIC)**Step 1 (Würth Initiator)**

WINA Initiator _____ Date _____

Step 2 (Supplier)Supplier Name _____ Check one: Distributor Manufacturer

Physical Address: _____ Payment Address: (check if same as physical address) _____

Street _____ Street _____

City / State / Zip _____ City / State / Zip _____

Sales Contact

Sales Contact _____

Sales Email _____

Sales Phone _____

Sales Fax _____

Accounts Receivable Contact

AR Contact _____

AR Email _____

AR Phone _____

AR Fax _____

Quality Contact

Quality Contact _____

Quality Email _____

Payment Information

Invoicing Currency: _____ PSA Contract 1%

Payment Terms: 5% 10 net 90

 Check Payment ACH / Wire (See page 2)**Additional Information**

Web Address _____

Please return the following required documents

- W-9 This form can be found through the IRS website: <http://www.irs.gov/pub/irs-pdf/fw9.pdf>
- Copy of Certificate of Insurance, indicating WINA as additional insured.
- Copy of supplier ISO/TS certificate if certified. If no certificate exists, please provide the Self-Evaluation Survey found online at the following address:
http://www.wurthindustry.com/web/en/wurthus/supplier_documents.php
- WINA Shipping Process: http://www.wurthindustry.com/web/media/pictures/wurthus/suppliers/WINA_Shipping_Process_Domestic_2015.pdf

Submit ALL required documents to WINA. Forms with unpopulated fields or missing documents will not be processed.

WÜRTH INDUSTRY OF NORTH AMERICA (WINA) NEW SUPPLIER APPROVAL FORM (DOMESTIC)
Substitute W-9 Request for Taxpayer Identification Number and Certification

Complete information below or attach a completed W-9 form

Please select from the options below:

Corporation Individual/Sole Proprietor Partnership Other

Taxpayer Identification Number (TIN)

Enter your TIN on the appropriate line. For individuals, this is your social security number (SSN). For other entities, it is your employer identification number (EIN). This number is the same as requested on Form W-9.

Employer Identification Number _____ Social Security Number _____

Certification

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.

Signature _____ Title _____ Date _____

ACH/Wire Payment Information

WINA will pay your invoices through Würth Group of North America (WUGONA). WUGONA is the in-house bank for the Würth Companies in the U.S. and will act as the payment processor.

Name of bank	
Address of bank	
Country and City of Bank	
Account Number	
Routing Number (9 digits)	
Exact name on account	

Supplier Signature _____ Signee's Name & Title _____

WÜRTH INDUSTRY OF NORTH AMERICA (WINA) NEW SUPPLIER APPROVAL FORM (DOMESTIC)**Step 3 (WINA International Approvals)**

- 1) Purchasing _____ Date _____
- 2) Accounting _____ Date _____ Supplier ID _____
- 3) Quality _____ Date _____ Wugona ID _____

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