Jim Hudson AUTOMOTIVE GROUP

ACURA Audi BUICK Cadillac CHEVROLET Ford GMC LEXUS TOYOTA

APPLICATION FOR CREDIT

Name: _____ Retail License Number: _____

Address: _____ Years at address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Ext: _____ Fax Number: _____

Tax Exempt: Yes ( ) No ( ) If so, Tax Exempt#_____ Please attach copy of ST-4 or ST-5 + ST-8.

AP Contact Name _____ AP Contact email _____

_____Corporation _____Partnership_____ Individual Please attach copy of W-9

Credit limit requested _____ Purchase Order Required - YES _____ NO _____

Bank Information:

Bank Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Bank Officer: _____

References:

1. Business Name: _____
   Address: _____
   City: _____ State: _____ Zip: _____
   Phone: _____ Account #: _____
   Contact Person: _____

2. Business Name: _____
   Address: _____
   City: _____ State: _____ Zip: _____
   Phone: _____ Account #: _____
   Contact Person: _____

3. Business Name: _____
   Address: _____
   City: _____ State: _____ Zip: _____
   Phone: _____ Account #: _____
   Contact Person: _____

All Invoices are due by the 10th of the following month. No later than 30 days after the statement date. Payments on balances received beyond 30 days of statement date are subject to the greater of $35.00 or 3.5% fee on the past due balance. Any checks received where funds are insufficient are subject to a $45.00 processing fee per occurrence plus any applicable late fee it may create. You represent you are an authorized representative with authority to enter into this agreement and the information contained in this application is true, correct and complete. You consent to us obtaining information about you and authorize your bank, vendors and credit reporting agencies to release the requested information for the purpose of establishing your credit worthiness. Jim Hudson Automotive Group as a whole or individually by store reserves the right to suspend and/or limit any line of credit at any time. If credit is granted, you agree to be bound by the terms of this application and all terms stated on our invoices.

Signature: _____ Print: _____

Date: _____ Title: _____

EMAIL APPLICATION TO LEXPARTS1@JIMHUDSON.COM

ST-4 (Rev. 08/2017)

STATE OF GEORGIA
DEPARTMENT OF REVENUE
SALES TAX CERTIFICATE OF EXEMPTION
OUT OF STATE PURCHASER

To: _____
SUPPLIER DATE

_____
SUPPLIER'S ADDRESS CITY STATE ZIP CODE

THE UNDERSIGNED HEREBY CERTIFIES that it is duly licensed and registered outside of the State of Georgia. The undersigned purchaser does not sell goods or services in Georgia, does not solicit orders in Georgia through employees or independent contractors, and does not perform any service in Georgia. The purchaser's only presence in Georgia consists of making purchases of tangible personal property. All tangible personal property purchased or leased pursuant to this certificate will be removed from the State of Georgia immediately after purchase; and such purchases or leases are exempt from Georgia sales tax for the reason noted below. (Check the Applicable Box.)

☐ 1. The purchased or leased tangible personal property is for resale.

☐ 2. The purchased materials are for future processing, manufacture, or conversion into articles of tangible personal property for resale that will become a component part of the finished product or that will be coated upon or impregnated into the product at any stage of its processing, manufacture, or conversion.

☐ 3. The purchased items are materials, containers, labels, sacks, or bags used for packaging tangible personal property for shipment or sale. The items will be used solely for packaging and are not being purchased for reuse.

If the purchaser has activity in Georgia beyond making the purchases described above, the purchaser will register with the Georgia Department of Revenue for sales and use tax purposes and will not use this form to make exempt purchases in the State.

Under the penalties of perjury, I declare that I have examined this certificate; and, to the best of my knowledge and belief, it is true and correct and made in good faith, pursuant to the sales and use tax laws of the State of Georgia. Further, I understand that any tangible personal property obtained under this certificate of exemption is subject to sales and use tax if the purchaser uses or consumes the property in any manner other than indicated above.

Purchaser's Name: _____

Tax ID Number: _____ State/Country of Issue: _____

Type of Business: _____

Business Address: _____

Printed Name and Signature: _____ Title: _____

Telephone Number: _____ Email Address: _____

Supplier must secure and maintain one properly completed certificate of exemption from each purchaser making purchases without the payment of the tax.

ST-5 (Rev. 07/11/22)

STATE OF GEORGIA
DEPARTMENT OF REVENUE
SALES TAX CERTIFICATE OF EXEMPTION
GEORGIA PURCHASER

To: _____
SUPPLIER DATE

_____
SUPPLIER'S ADDRESS CITY STATE ZIP CODE

THE UNDERSIGNED HEREBY CERTIFIES that all purchases* made after this date will qualify for the tax-free or tax-exempt treatment indicated below. (Check the Applicable Box) (*The terms "purchase" and "sale" include leases and rentals.)

☐ 1. Purchases of tangible personal property or services for **RESALE ONLY**. O.C.G.A. § 48-8-30. A sales and use tax number is required unless the purchaser is one of the following: church, qualifying tax exempt child caring institution, tax exempt parent-teacher organization or association, private school (grades K-12), nonprofit entity raising funds for a public library, member councils of the Boys Scouts of America or Girl Scouts of the U.S.A. **TAX-FREE TREATMENT DOES NOT EXTEND TO ANY PURCHASE TO BE USED BY THE PURCHASER, INCLUDING ITEMS THE PURCHASER WILL DONATE.** O.C.G.A. §§ 48-8-3(15), (39), (41), (56), (59), (71).

☐ 2. Purchases of tangible personal property or services made by the United States government, the state of Georgia, any county or municipality of this state, fire districts which have elected governing bodies and are supported in whole or in part by ad valorem taxes, or any bona fide department of such governments when paid for directly to the seller by warrant on appropriated government funds. A sales and use tax number is not required for this exemption. O.C.G.A. § 48-8-3(1)(A).

☐ 3. Purchases of tangible personal property or services made by any authority created by local law enacted by the General Assembly or local constitutional amendment, which authority provides public water or sewer service. A sales and use tax number is not required for this exemption. O.C.G.A. § 48-8-3(1)(B).

☐ 4. Purchases of tangible personal property or services made by the University System of Georgia and its educational units, the American Red Cross, a Community Service Board located in this state, Georgia Department of Community Affairs Regional Commissions, or specific qualified authorities provided with a sales tax exemption under Georgia law. A sales and use tax number is not required for this exemption. O.C.G.A. §§ 37-2-6.1(d), 48-8-3(8), 50-8-44.

☐ 5. The sale, use, consumption, or storage of materials, containers, labels, sacks, or bags used for packaging tangible personal property for shipment or sale. Materials purchased at a retail establishment for consumer use are not exempt. A sales and use tax number is not required for this exemption. O.C.G.A. § 48-8-3(94).

☐ 6. Aircraft, watercraft, motor vehicles, and other transportation equipment manufactured or assembled in this state when sold by the manufacturer or assembler for use exclusively outside this state and when possession is taken from the manufacturer or assembler by the purchaser within this state for the sole purpose of removing the property from this state under its own power when the equipment does not lend itself more reasonably to removal by other means. A sales and use tax number is not required for this exemption. O.C.G.A. § 48-8-3(32).

☐ 7. The sale of aircraft, watercraft, railroad locomotives and rolling stock, motor vehicles, and major components of each, that will be used principally to cross the borders of this state in the service of transporting passengers or cargo by common carriers and by carriers who hold common carrier and contract carrier authority in interstate or foreign commerce under authority granted by the United States Government. Replacement parts installed by carriers in such aircraft, watercraft, railroad locomotives and rolling stock, and motor vehicles that become an integral part of the craft, equipment, or vehicle are also exempt. The exemption does not extend to private carriers. O.C.G.A. § 48-8-3(33)(A).

☐ 8. Purchases of tangible personal property or services made by the Federal Reserve Bank, a federally charted credit union, or a credit union organized under the laws of this state. A sales and use tax number is not required for this exemption. 12 U.S.C. §§ 531, 1768 § 1768; O.C.G.A § 48-6-97.

Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, this certificate is true and correct and made in good faith, pursuant to the sales and use tax laws of the State of Georgia. Further, I understand that any tangible personal property obtained under this certificate is subject to sales and use tax if the purchaser uses or consumes the property in any manner other than indicated above.

Purchaser's Name: _____ Sales Tax Number: _____ (IF REQUIRED)

Purchaser's Type of Business: _____

Purchaser's Address: _____

Printed Name _____ Title: _____

Signature _____

Telephone Number: _____ Email: _____

Supplier must secure and maintain one properly completed certificate of exemption from each purchaser making purchases without the payment of tax.

1350

dor.sc.gov

STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE

RESALE CERTIFICATE

ST-8A
(Rev. 12/29/25)
5010

Need to verify a Retail License number? Visit **dor.sc.gov/verify-a-retail-license**.

Notice To Seller:

It is presumed that all sales are subject to Sales Tax until the contrary is established. The burden of proof is on the seller that the sale of tangible personal property is not a retail sale. However, if the seller receives a resale certificate signed by the purchaser stating that the property is purchased for resale, the liability for the Sales Tax shifts from the seller to the purchaser.

This certificate is intended for use by licensed retail merchants purchasing tangible personal property for resale, lease or rental purposes. To be valid, the following conditions must be met:

1. The resale certificate presented to the seller by the purchaser contains all the information required by the SCDOR and has been fully and properly completed.
2. The seller did not fraudulently fail to collect or remit the tax, or both.
3. The seller did not solicit a purchaser to participate in an unlawful claim that a sale was for resale.

The seller must maintain a copy of this certificate to substantiate the exemption in the event of an audit. This certificate is not valid if it does not meet the above requirements, and the seller remains liable for the tax.

Seller's Information:

Name

Address | City | State | ZIP

Purchaser's Information and Acknowledgement:

Type of business: _____

Type of items sold, leased or rented to others: _____

Business name

Street Address

South Carolina Retail License Number/File Number
If not SC, indicate a valid retail license number and state.

City | State | ZIP

As the purchaser, I certify that I am engaged in the business of selling, leasing or renting tangible personal property of the kind and type sold by your business. I also certify that if the tangible personal property is withdrawn, used or consumed by the business or person withdrawing it (even if later resold), I will report the transaction to the SCDOR as a withdrawal from stock and pay the tax based upon the reasonable and fair market value, but not less than the original purchase price. For more information, see Regulation 117-309.17, available at **dor.sc.gov/policy**. This certificate shall remain in effect unless revoked or canceled in writing. Furthermore, I understand that by extending this certificate, I am assuming liability for the Sales or Use Tax on transactions between your business and me.

Print name of owner, partner or officer

Signature of owner, partner, or officer

Date certificate completed

Title

50101039

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to *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.

1 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.)

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . .

Note: 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.

☐ 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 Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b 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 . . . . . ☐

5 Address (number, street, and apt. or suite no.). See instructions.

Requester's name and address (optional)

6 City, state, and ZIP code

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. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			–			–				

or

Employer identification number

		–							

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** | **Date**

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*.

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