

August 24, 2018

RE: Credit Application

Dear Sir/Madam:

Thank you for your interest in STC. Please fill out the following information and return to STC via fax (650-856-8811) or email (sales@stcvalve.com) for review.

By submitting this application, you authorize STC Valve to make inquiries into the banking and business/trade references that you have supplied.

Best regards,

The STC Team
Sizto Tech Corporation



Sizto Tech Corporation 892 Commercial Street Palo Alto, CA 94303 USA www.StcValve.com

Tel: 650.856.8833 Fax: 650.856-8811

Email: Sales@StcValve.com

| BUSINESS CONTACT INFORMATION | | | |
|--|--------------|-----------------|-----------|
| Company Name: | | | |
| Contact Name: | | Title: | |
| Phone: | Fax: | Email: | |
| Mailing/Billing Address: | | | |
| City: | | State/Province: | ZIP Code: |
| Shipping Address (if different than mailing address above): | | | |
| City: | | State/Province: | ZIP Code: |
| A/P Contact Name: | | A/P Email: | |
| | | | |
| BUSINESS AND CREDIT INFORMATION | | | |
| Year Business Commenced: | | | |
| Sole Proprietorship: | Partnership: | Corporation: | Other: |
| Bank Name: | | | |
| Bank Address: | | Phone: | |
| City: | | State/Province: | ZIP Code: |
| Type of account (e.g., savings, checking, other): | | | |
| Account Number: | | | |
| | | | |
| BUSINESS/TRADE REFERENCES – list a minimum of three (3) references | | | |
| Company Name: | | | |
| Address: | | | |
| City: | | State/Province: | ZIP Code: |
| Phone: | Fax: | Email: | |
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| City: | | State/Province: | ZIP Code: |
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