



Alliance Cold is an international warehousing and logistics partner committed to delivering sophisticated, customized, and dependable cold chain solutions to leading food, retail, agriculture and distribution companies. We serve customers who put a premium on excellence and reliability to ensure our nation's food supply is handled, stored and delivered safely and securely through the entire supply chain.

Safety

The goods of our partners and our customers are our top priority and we work to assure their safety and security.

Creativity

Our model is based on finding creative market based solutions to the issues and situations that affect our customers' products, projects, and people.

Service

Our communication is constant and we seek to provide a service infrastructure for continuous improvement and total quality.

Charity

Our Giving back is incredibly important to us. Our business model accounts for a level of grace bestowed upon us that we weave into the fabric of our execution everyday.









ALLIANCE COLD

Credit Application

The undersigned company is applying for credit with and agrees to abide by the standard terms and conditions of contract.

Company name										
DBA (if different)										
Contact person										
Address										
Phone			Fax							
Federal tax ID or Social Security number.		_	·							
Type of business			No. Of e	employees						
Date business established		_	·							
Amount of credit requested \$										
Are you a: □ CORPORATION										
State of incorporation										
Names, titles, and addresses of your three chie	f corpora	ite officer	's							
Name and address of your resident agent										
□ PARTNERSHIP										
Names and addresses of the partners										
_										
□ SOLE PROPRIETORSHIP										
Are you sales tax exempt?		Yes		No						
Have you ever had credit with us before?		Yes		No						
If yes, under what name?										
Authorized purchasers										
Purchase order required?		Yes		No						

5345 Towne Square Drive - Suite 205 Plano, Texas 75024

info@alliancecold.com Tel: (866) 986-5366 Fax:(866) 436-3780

ALLIANCE COLD

TRADE REFERENCES

Reference #1	Name
	Address
	Phone
Reference #2	Name
	Address
	Phone
Reference #3	Name
	Address
	Phone

BANK REFERENCES

Bank#1	Account #
	Phone
	Contact person
	Name of bank
	Address
Bank#2	Account #
	Phone
	Contact person
	Name of bank
	Address

ALLIANCE COLD

uthorized signature: rinted name:
ERMS NET 30 DAYS.
riginal signed copy of credit application must be received before final credit approval.
nave read the terms and conditions stated below and agree to all of these terms and conditions.
ade references, banks, and credit reporting agencies to disclose to any and all information concerning the financial and credit history of my ompany and myself.
vestigation as sees fit, including contacting the above trade references and banks and obtaining credit reports. My company and I authorize all

Date:

Title:



CONTACT/BANKING INFORMATION

ALLIANCE COLD ID'S

FED ID: 82-1517615

MC: 32919

CONTACT INFO:

DISPATCH: dispatch@alliancecold.com

REMITTANCE:

• Payment by electronic funds

BANK OF AMERICA

ABA Routing Number: 026009593 (WIRES)
ABA Routing Number: 111000025 (PAPER/ACH)

Account Number: 488117385405

Beneficiary: Alliance Cold

TERMS: 7 days

Please send payment confirmations to billing@alliancecold.com

Form (Rev. October 2018) Department of the Treasury

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.

internai	Reve	nue Service Go to V	vvvv.iis.gov	/FOITHWY9 TOT HIST	ructions and the late	est illion	ııatı	OII.						
		lame (as shown on your income tax return		uired on this line; do	not leave this line blank									
-		cas Public Refrigerated Assets	<u> </u>											
	2 E	Business name/disregarded entity name, if	f different from	above										
	dba	a Alliance Cold												
bage 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.							certa	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
e. ns on p	✓ Individual/sole proprietor or □ C Corporation □ S Corporation □ Partnership □ single-member LLC						Trust/estate Exemp						<i>'</i>)	
ti pe	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶													
Print or type. Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that							code	Exemption from FATCA reporting code (if any)					
_ ∺		is disregarded from the owner should of	heck the appro	opriate box for the ta	x classification of its owi	ner.			(Applie	. to	nto main	tainad au	haida ti	no ((C)
bed	5 ^	Other (see instructions) ► ddress (number, street, and apt. or suite of	no) See instru	ctions		Request	tor's	name	6 20020	s to accour			side ti	le U.S.)
o		45 Towne Square Drive, Suite 20		ctions.		nequest	lei S	патте	and ad	uress (C	puone	11)		
See		<u> </u>				-								
		City, state, and ZIP code ano, Texas 75024												
-		<u> </u>												
	<i>/</i> L	ist account number(s) here (optional)												
Dor		Taypayar Idantification	Mumbar /	TINI										
Par		Taxpayer Identification TIN in the appropriate box. The TIN		·	o given on line 1 to a	roid	Soc	rial se	curity	number				
		thholding. For individuals, this is gen									$\overline{}$	$\overline{\Box}$	$\overline{}$	
reside	nt al	ien, sole proprietor, or disregarded e	entity, see the	e instructions for P	art I, later. For other				-		-			
		is your employer identification numb	er (EIN). If yo	ou do not have a n	umber, see <i>How to ge</i>									
TIN, la					Alaa aaa 14/6ad Alama		or Em	nlovo	r identi	fication	num	hor.		
Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.			ana [pioye	- Identi	Toation			$\overline{}$	=			
Transact to dive the requester for guidelines on whose number to enter.					8	2	_ 1	5 1	. 7	6	1	5		
Part		Certification												
		alties of perjury, I certify that:												
			et tavnaver i	dentification numb	er (or Lam waiting for	a numbe	ar to	ho is	eued t	o ma).	and			
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	al	J.S. citizen or other U.S. person (defi	ned below);	and										
4. The	FAT	TCA code(s) entered on this form (if a	any) indicatin	g that I am exemp	t from FATCA reporti	ng is corr	ect.							
you ha acquis	ve fa ition	on instructions. You must cross out it alled to report all interest and dividends or abandonment of secured property, interest and dividends, you are not red	s on your tax canqellation	return. For real esta of debt, contribution	ate transactions, item 2 ons to an individual reti	2 does no rement ar	t ap	ply. F gemer	or mor nt (IRA)	tgage i , and g	nteres enera	st paid Ily, pay	, yme	nts
				•	, , ,									
Sign Here		Signature of U.S. person ►	13		Date ▶ 1/1/2024									
General Instructions			 Form 1099-DIV (dividends, including those from stocks or mutual funds) 											
Section references are to the Internal Revenue Code unless otherwise noted.				 Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) 										
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.			 Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) 											
				 Form 1099-S (proceeds from real estate transactions) 										
Purpose of Form			 Form 1099-K (mer 	rchant ca	ard a	ınd th	ird par	ty netv	vork t	ransa	ctio	าร)		
An individual or entity (Form W-9 requester) who is required to file an			d to file an	• Form 1098 (home mortgage interest), 1098-E (student loan interest),										

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1098 (home mortgage interest), 1098-E (student loan interest)
 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



U.S. Department of Transportation
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E. Washington, DC 20590

SERVICE DATE July 06, 2017

LICENSE MC-32819-B

U.S. DOT No. 3018070 TEXAS PUBLIC REFRIGERATED ASSETS LLC D/B/A ALLIANCE COLD PLANO, TX

This License is evidence of the applicant's authority to engage in operations, in interstate or foreign commerce, as a **broker**, **arranging for transportation of freight (except household goods)** by motor vehicle.

This authority will be effective as long as the broker maintains insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). The applicant shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

Jeffrey L. Secrist, Chief

Alfry L. Stein +

Information Technology Operations Division