



My Favorite Chicken's mission is to provide innovative backyard chicken supplies that consistently meet or exceed our customers' expectation. We welcome you as a new customer and look forward to supplying your business with its poultry equipment needs.

As a new customer of My Favorite Chicken, please find the following:

- MFC Credit Application
- Sales and Use Tax Exemption Certificate
(please supply your State form as applicable)
- MFC's W-9 Form for your records

Please complete the credit application and include the appropriate sales tax form and forward to our Accounting Department via email attention Thomas J Parkhill at: info@myfavoritechicken.com

MFC Phone:
800-684-1552

Our standard terms of payment extended to new customers that complete the credit application process are Net 30. Invoices are emailed or submitted via EDI upon shipment of order. Any invoices not paid within terms set are considered past due. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our Accounting Department.

We welcome you to My Favorite Chicken and look forward to a great business relationship.



MY FAVORITE CHICKEN

Customer Credit Application & Agreement

BUSINESS CONTACT INFORMATION

Company Name:		Federal Tax ID #:	D-U-N-S #:	Years in Business:	Est. Annual Purchases (\$):
Billing Address:		City, State:	Zip Code:	Phone #:	Fax #:
Ship-to Address (if different):		City, State:	Zip Code:	Phone #:	Fax #:
Purchasing Agent Name:	Phone #:	Email Address:	Accounts Payable Contact:	Phone #:	Email Address:
MFC Sales Representative:		Shipping Instructions (Dock Hours, Forklifts, Appt Needed, Etc.):			

Type of Ownership: (Mark one) Corporation Partnership Limited Partnership LLC Individual

BANK REFERENCES

Bank:	Branch:	Bank Officer:	Phone #:	Account Number(s):
Bank:	Branch:	Bank Officer:	Phone #:	Account Number(s):

COMPANY OWNERS / OFFICERS

President / Owner:	Address:	City, State:	Zip Code:
Name / Title:	Address:	City, State:	Zip Code:
Name / Title:	Address:	City, State:	Zip Code:

TRADE REFERENCES (Attach a separate page, if necessary)

Company Name:	Address:	City/State:	Zip Code:
Contact Name:	Phone #:	Fax #:	Email: Account #:
Company Name:	Address:	City/State:	Zip Code:
Contact Name:	Phone #:	Fax #:	Email: Account #:
Company Name:	Address:	City/State:	Zip Code:
Contact Name:	Phone #:	Fax #:	Email: Account #:

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of credit to be extended. I authorize you to verify this information by securing data from a credit reporting agency. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to My Favorite Chicken in order to verify the information contained herein. The company I represent agrees to pay this account in accordance with My Favorite Chicken credit terms. We understand that all past due balances will be subject to a late fee. We further agree to pay a 25% collection charge, in the event of default, if the account is placed with an attorney or bonded collection agency.

Authorized Signature: _____

Date: _____

Printed Name: _____

For any questions regarding this Credit Application, please contact the Accounting Department at 800-684-1552. We look forward to doing business with you.

OFFICE USE ONLY:

Credit Approved: Yes No Initials Credit Limit: Terms: Date:

TEXAS SALES AND USE TAX RESALE CERTIFICATE

Name of purchaser, firm or agency	Phone (Area code and number)
Address (Street & number, P.O. Box or Route number)	
City, State, ZIP code	
Texas Sales or Use Tax Permit Number (or out-of-state retailer's registration number or date applied for Texas Permit – must contain 11 digits if from a Texas permit)	
<input style="width: 95%;" type="text"/>	<i>(Mexican retailers must show their Federal Taxpayers Registry (RFC) number on the certificate and give a copy of their Mexican registration form to the seller.)</i>

I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:

Seller: **Parkhill Family Enterprises, LLC dba My Favorite Chicken**

Street address: **1415 W Johnson St, Suite 109**

City, State, ZIP code: **Denison, TX 75020**


Description of items to be purchased on the attached order or invoice:

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

The taxable items described above, or on the attached order or invoice, will be resold, rented, or leased by me within the geographical limits of the United States of America, its territories and possessions, or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease, or rental and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

 Purchaser	Title	Date
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This certificate should be furnished to the supplier. Do **not** send the completed certificate to the Comptroller of Public Accounts.

TEXAS SALES AND USE TAX EXEMPTION CERTIFICATION

Name of purchaser, firm or agency	
Address (Street & number, P.O. Box or Route number)	Phone (Area code and number)
City, State, ZIP code	

I, the purchaser named above, claim an exemption from payment of sales and use taxes (for the purchase of taxable items described below or on the attached order or invoice) from:

Seller: **Parkhill Family Enterprises, LLC dba My Favorite Chicken**


Street address: **1415 W Johnson St, Suite 109** City, State, ZIP code: **Denison, TX 75020**

Description of items to be purchased or on the attached order or invoice:

Purchaser claims this exemption for the following reason:

I understand that I will be liable for payment of sales or use taxes which may become due for failure to comply with the provisions of the Tax Code: Limited Sales, Excise, and Use Tax Act; Municipal Sales and Use Tax Act; Sales and Use Taxes for Special Purpose Taxing Authorities; County Sales and Use Tax Act; County Health Services Sales and Use Tax; The Texas Health and Safety Code; Special Provisions Relating to Hospital Districts, Emergency Services Districts, and Emergency Services Districts in counties with a population of 125,000 or less.

I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase, will be used in a manner other than that expressed in this certificate and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

 Purchaser	Title	Date
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NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

This certificate should be furnished to the supplier. Do **not** send the completed certificate to the Comptroller of Public Accounts.



Credit Card Authorization Form

Company Name: _____

Name on Card: _____

Billing Address: _____

Email address: _____

Phone Number: _____

Credit Card Type: Visa Mastercard Discover AmEx

Credit Card Number: _____

Expiration Date: _____

Security Code: _____ (The 3-digit code on the back OR 4-digit code on the front for AMEX)

I, _____, authorize My Favorite Chicken to charge my credit card for any agreed upon purchases, including a convenience fee of 3% on the total amount. I understand that this information will remain confidential and available for future transactions on my account.

Cardholder Signature: _____

Date: _____

Return the completed and signed form

to: info@myfavoritechicken.com

My Favorite Chicken

PO BOX 716

Melissa, TX 75454

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Parkhill Family Enterprises, LLC	
2 Business name/disregarded entity name, if different from above My Favorite Chicken	
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. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ P 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 is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> 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 FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.) See instructions. 2605 Katie Trail	Requester's name and address (optional)
6 City, state, and ZIP code Melissa, TX 75454	
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. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
8	2	-	1	6	0	3	1	9	6

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 ▶ <i>Thomas J Parkhill</i>	Date ▶ 01/01/2024
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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.

Purpose of Form

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 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- 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.