

SECTION 1 – COMPANY INFORMATION

Company Legal Name (exact legal name): _____ DBA (if any): _____

Type of Business	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Sole Proprietor	EIN:	Ever Filed Bankruptcy: <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Other: _____		Credit Line Requested:	

State of Organization: _____ Date Business Formed: _____ Description of Business or Service: _____ Gross Monthly Income: \$ _____

Phone Number: _____ Fax Number: _____ Email: _____

A/P Contact: _____ PO Required: _____ Tax Exempt Number (if any): _____

Company Physical Address: Own Rent Years at Present Location: _____
 Street: _____ City: _____ State: _____ Zip: _____

Company Mailing Address (if different from above):
 Street: _____ City: _____ State: _____ Zip: _____

Owner/Member/Partner/Officer (attach additional sheets if necessary):

The following persons complete this section as appropriate for business type:
 Partnership: all partners (other than limited partners)
 Sole Proprietorship: owner
 Limited Liability Company: all managers; if no managers, all members
 Corporation: all owners of 50% or more of Company's stock, President, CEO and CFO
 Other: officers and all persons in charge of the day to day operations of the Company

Name (First, M.I., Last or entity):	Home Address (Individual)/Business Address (entity):	% Ownership
		Title

Name (First, M.I., Last or entity):	Home Address (Individual)/Business Address (entity):	% Ownership
		Title

SECTION 2 –BANK AND TRADE REFERENCES; FINANCIAL STATEMENTS

Bank Reference (complete and sign an Authorization Letter):

Bank Name:	Account Number:	Phone number:
	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan	Fax number:
Bank Address:	Account Number:	Email:
	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan	Banker Name:

Trade References (Complete and sign an Authorization Letter for each):

Name:	Address:	Phone number:
Contact:	Relationship and length of time:	Email:
Name:	Address:	Phone number:
Contact:	Relationship and length of time:	Email:
Name:	Address:	Phone number:
Contact:	Relationship and length of time:	Email:

Financial Statements:

Cross Country Infrastructure Services USA, Inc. ("CCI") may require Company and each Guarantor to provide to CCI the Company's and Guarantor's current and prior year financial statements. If requested, this Application will not be complete until CCI receives the financial statements.

SECTION 3 – AUTHORIZATION

I, if an individual, or otherwise on behalf of the Company, have read and agree to the Credit Application and Account Terms and Conditions contained at www.crosscountryis.com/pdf/credittermsandconditions.pdf and Privacy Policy contained and located at www.crosscountryis.com/pdf/privacypolicy.pdf in effect on the date of this Credit Application, all of which are incorporated in and a part of this Credit Application and, in the event of approval of the Credit Application, together with the Credit Application form the Credit Account Agreement.

By signing below, Company certifies, understands and agrees that: 1) this Credit Application ("Application") is made for the sole purpose of obtaining commercial credit and is not a consumer transaction; 2) by completing this Application in any capacity, including, without limitation, as the principal of a formal business entity or as a sole proprietor or individual, even if the signatory's personal creditworthiness alone is the basis for establishing eligibility for services sought by this Application, Company is seeking credit for commercial and/or business purposes only, and not for personal, family or household use; 3) that the information contained in this Application is true and correct; 4) that this information is being furnished to Cross Country Infrastructure Services USA, Inc. ("CCI") for the purpose of inducing CCI to extend credit to Company, and that CCI intends to rely upon such information; and 5) that CCI will retain this Application whether or not it is approved. In connection with CCI's evaluation of and credit inquiry with respect to this Application, Company hereby authorizes CCI, to the extent CCI deems necessary or appropriate, from time to time to: 1) obtain and verify information about Company, 2) obtain credit reports on Company from credit reporting agencies, 3) contact and inquire of any person or entity of any kind regarding the financial information of or references of Company, including bank and trade references and information furnished by credit reporting agencies, and 4) otherwise investigate the credit of Company. Company hereby instructs all credit reporting agencies to provide CCI with such credit reports upon request. Company authorizes all Trade References and Bank References named in this Application to furnish information to CCI concerning Company's credit, purchase, and payment history. Company authorizes CCI to release information to other creditors or credit reporting agencies regarding CCI's credit experience with Company. In the event this Application is approved, this is a continuing authorization for all present and future disclosures of financial information, account information and credit experience on the Company for purposes of updating, renewing, extending, reviewing, servicing, and collecting on the Credit Account (defined in the Commercial Credit Account Terms and Conditions), as well as other legitimate purposes associated with the Credit Account.

This Application does not obligate CCI to extend credit to Company or any entity(ies) or person(s) identified in this Application and is not and shall not be construed to be an offer of credit or an agreement to sell or lease to the Company. A decision to grant or deny this Application will be made by CCI in the sole and absolute discretion of CCI. CCI shall have no obligations under this Application unless and until this Application is approved.

The individual signing this Application affirmatively states, represents and warrants that he or she is duly authorized to do so on Company's behalf.

COMPANY NAME:	By Authorized Representative:	TITLE
	Printed Name:	DATE

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.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Cross Country Infrastructure Services USA, Inc.</p> <p>2 Business name/disregarded entity name, if different from above</p>	
	<p>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.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input checked="" type="checkbox"/> C Corporation</p> <p><input type="checkbox"/> S Corporation</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><small>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.</small></p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions. 2251 Rifle Street</p> <p>6 City, state, and ZIP code Aurora, Colorado 80011</p>	<p>7 List account number(s) here (optional)</p> <p>Requester's name and address (optional)</p>

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	1	-	3	2	7	3	8	2	5

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 ▶ <u>1/6/22</u>
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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.



MUFG Union Bank, N.A.

NAWIB Union Bank
200 Pringle Ave., Ste 250
Walnut Creek, CA 94596
T: +1-925-947-3091
M: +1-510-685-4985
CRiveraSmith@us.mufg.jp

May 17, 2021

This letter is to provide updated payment instructions for Cross Country. This is an open and valid account currently with MUFG Union Bank.

Bank Name: MUFG Union Bank, N.A.

Bank Address: 1980 Saturn Street, Monterey Park, CA 97155

Bank ABA #: 122000496 (Domestic)

Bank Swift #: BOFCUS33MPK (International)

Account Name: Cross Country Infrastructure Services US

Account Number: 4581000348

Lockbox Standard Mail Instructions:

Cross Country Infrastructure Services USA, Inc.
P.O. Box 647003
Dallas, TX 75264-7003

Lockbox Overnight Mail Instructions:

Cross Country Infrastructure Services USA, Inc.
Lockbox 647003
2923 Bradley Street, Suite 190
Pasadena, CA 91107

Please call with any questions.

Thank you,

A handwritten signature in black ink, appearing to read "Cristina Rivera-Smith", with a stylized flourish at the end.

Cristina Rivera-Smith

Vice President, Sr. Treasury Sales
Transaction Banking
MUFG Union Bank, N.A.