



Allegheny Technologies Incorporated (ATI) Supplier Onboarding Form

- Thank you for your interest in serving the needs of the ATI Companies.
- Please review and complete this form, sign, scan and save to your computer for your records.

Supplier Requirements

- Supplier has read and agrees to the Supplier Expectations & Supply Chain Policies, ATI's Standard Purchase Terms & Conditions, and Onboarding Processes & Documents posted on ATI's public website at: www.atimetals.com/aboutati/supplier/ (any of foregoing documents may be revised by ATI, with such revisions effective 60 days after posting of the foregoing website)
- Supplier has read and understands ATI's [Corporate Guidelines for Business Conduct and Ethics](#)
- Supplier acknowledges that a standard [W-9](#) ([W-8BEN](#) if a foreign supplier filing as an Individual, or, [W-8BEN-E](#) if a foreign supplier filing as an Entity) must be on file, and:
 - If the information provided does not exactly match the remit to name on invoicing, payment will be delayed
 - Purchase Orders cannot be processed until such information is received in full
- Supplier acknowledges that Purchase Orders will be transmitted electronically
- Supplier acknowledges all invoices require a valid purchase order for payment
- Supplier intending to be legally bound agrees that acceptance of a Purchase Order from any ATI Company, including acceptance of ATI's Standard Purchase Terms & Conditions, shall occur upon the happening of any of the following event(s):
 - 1. Receipt by ATI of the signed acknowledgement copy of the Purchase Order
 - 2. Supplier's commencement of performance of the Purchase Order
 - 3. Supplier's notification to ATI of its intent to deliver or provide goods or services
- Supplier understands that depending upon the type of goods or services, additional terms and conditions, as required by ATI, may apply
- Supplier understands and agrees that ATI Standard Payment terms are 2% - 20 Net 60 days and ATI's standard freight term is DDP (Incoterms 2010) Destination (ATI Receiving Location)
- Supplier is Equal Opportunity and Affirmative Action compliant
- Supplier is not presently debarred, suspended, proposed for debarment, or declared ineligible for award of purchase orders/contracts
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Identify the ATI Business Unit(s) you wish to do business with:

ATI Corporate

ATI Flat Rolled Products

ATI Forged Products

ATI Cast Products

ATI Specialty Materials

ATI Specialty Alloys & Components

ATI Contact Name(s) : _____

By signing you certify you have read and agree to the Supplier Requirements:

Supplier Name: _____

Authorized Signature: _____

Title: _____

Printed Name: _____

Date: _____



REQUIRED INFORMATION FOR SUPPLIER SETUP

To establish an account with ATI, all of the following information is required. A standard W9 or W8 must also be on file. If the information provided does not exactly match the remit to name on invoicing, payment will be delayed.

Company Name _____
Invoice Remit-to Name _____

Business Type
Corporation Individual
Partnership LLC

Remit to Address _____
City _____ State _____
Zip _____ Country _____

Small Business Type (if registered)
Minority Owned Veteran Owned
Women Owned HUB Zone
Small Disadvantaged
Service-Disabled Veteran-Owned

Purchase Order Mailing Address: _____
City _____ State _____
Zip _____ Country _____

Conflict Minerals Content
Do any of the products which your company could supply to ATI contain any Conflict Minerals, which are defined as Tin, Tantalum, Tungsten or Gold?
Yes No
***If yes, Please provide the country of origin of conflict minerals(s).**

Purchase Order Email Address: _____

Credit Card Acceptable: Yes No

Federal Taxpayer ID Number: _____

NAICS # _____

D&B Number: _____

Website _____

EDI Capable: Yes No

ISO/QS Certified: Yes No

Type _____

Product description or Service to be performed: _____

Service to be performed at: ATI Location Supplier Location

Product Country of Origin: _____

Delivery By: Commercial Carrier Company Vehicle

Payment Terms: (check one) 2% 20 Net 60 Net 60

Supplier's Primary Sales Contact: _____
Phone # _____
Email _____

Supplier's Primary Accounting Contact: _____
Phone # _____
Email _____

Your company's account cannot be created in our system until this information is received in full & complies with instruction on this form.



ADDITIONAL INFORMATION FOR SUPPLIER SETUP

Exceptions to the EFT Agreement may apply at ATI's determination

(EFT) Electronic Funds Transfer Authorization Agreement

I hereby authorize ATI, hereafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) account indicated below and the depository named below, hereafter called DEPOSITORY, to credit and debit the same entries to such account.

BANK ACCOUNT NAME: _____
(Exactly as it appears on the bank account)

ABA ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

This authority is to remain in full force and effect until COMPANY has received written notification from me on its termination in such time and in such manner as to afford COMPANY a reasonable time to act on it.

SUPPLIER NAME: _____

TAX ID NUMBER: _____

CONTACT NAME &
PHONE NUMBER: _____

EMAIL ADDRESS: _____
(Notification of EFT payments will be sent to this address)

SUPPLIER
AUTHORIZED SIGNATURE: _____

PRINTED NAME: _____

TITLE: _____

DATE: _____

****PLEASE NOTE THAT THIS PROCESS CAN TAKE UP TO TWO WEEKS****