

USA GATEWAY INC.

Dbas GTT International / Majestic Vacations / GTT Glob
600 Data Drive, Suite 101, Plano, TX 75075
TEL: 972-239-5069 FAX: 972-432-7636

GTT Agency Application

To: All USA Gateway Inc. Agency Applicants

From: GTT Management

Thank you for your application to become an agency customer of USA Gateway Inc.

In order to be an approved Agency with USA Gateway Inc (GTT,) please fill out the following forms. Upon receiving these completed forms, the GTT management team will initiate the internal approval process, which typically takes about a week.

Please fill out and sign the Agency Agreement & Letter of Understanding form, which includes your business entity information and the owner's contact information.

In accordance with IRS regulation as well as to assist us in issuing 1099 forms each year, we are required to keep records of current Federal Taxpayer Identification number for all vendors. Please also complete copy of W9 form.

Rest assured, we strictly follow confidentiality law and use your information for our business transaction purposes only.

To expedite the process, please fill out the "referred by _____" on the form. You can write our branch manager name if it was he or she you spoke with, or write web site if you discovered GTT from our web site. Without this, the application processing may be delayed.

Please return this complete fill-out form to the branch manager at the GTT branch with which you will be working. The sooner you return them, the sooner we can initiate the approval process.

We are looking forward to work with you in the future to come.

Sincerely,

GTT Management

New Agency Application ARC

USA GATEWAY INC

Dbas GTT International / Majestic Vacations / GTT Global
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AGENCY AGREEMENT & LETTER OF UNDERSTANDING

Agency Name: _____

Agency Office Address: _____

City: _____ State: _____ Zip: _____

Tel: (_____) _____ Fax: (_____) _____

Email: _____ Agency Affiliation: _____

Website: _____

ARC # _____ IATA # _____ CLIA # _____ TRUE # _____ Date Appointed: _____

Owner's Full Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Top One Market: _____ (e.g. Africa, China, Taiwan, Hong Kong, Japan, S. Korea, Philippines, Vietnam, India, Africa, Middle East, Latin America, Eastern Europe, South Pacific, USA main stream markets or other – please specify)

This AGREEMENT is made on _____, 20____ between USA Gateway Inc and _____ (owner's name).

In this agreement, the "Agency Owner" agrees to be personally responsible for all financial transactions between the "Agency" and USA Gateway Inc, DBA GTT.

- 1) Agency fully agrees to pay "USA Gateway Inc." payment for all tickets issued under the account set up for your agency.
- 2) Agency fully agrees to pay "USA Gateway Inc." any fees/penalties or debit memos issued by the airlines for any booking/pricing violations or alteration of ticketed PNR's committed by the "Agency" on any record re-released back to the "Agency" after ticketing.
- 3) Agency fully agrees to pay "USA Gateway Inc." any and all amounts due as a result of a credit cardholder disclaiming charges for ticket/s purchased from "USA Gateway Inc." including fees/penalties or debit memos associated with any credit card charge back or fraud issue committed by the passenger/cardholder.
- 4) Agency fully agrees to pay "USA Gateway Inc." any fees/penalties or debit memos issued by the airlines for any "HX" segments not being removed from any reservation re-released back to the "Agency" after ticketing and for any debit memos resulting from a NO SHOW.
- 5) Agency fully agrees to pay "USA Gateway Inc." any commission recall generated by the airlines on refunded tickets processed through GTT or the airlines directly.
- 6) Agency will be fully responsible for advising passengers of any schedule changes or flight cancellations.
- 7) If Agency fails to pay "USA Gateway Inc." any amount when due under this agreement, Agency agrees to pay all costs of collection, including but not limited to all court costs and reasonable attorney fees.

AGENCY

Owner Signature: _____

Name Printed: _____

Date: _____

GTT

GTT Signature: _____

Name Printed: _____

Date: _____

PLEASE PROVIDE COPY OF YOUR BUSINESS LICENSE, AND DRIVER LICENSE.

GTT Branch Office _____

GTT Account Code _____

Referral Source (e.g. manager Name or from web site) _____

Agency GDS: Amadeus _____

Apollo _____ Sabre _____

Worldspan _____

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.	
	2 Business name/disregarded entity name, if different from above	
	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.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<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	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ 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.	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) <input checked="" type="checkbox"/>	(Applies to accounts maintained outside the U.S.)
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
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									
-									

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 <input checked="" type="checkbox"/>	Date <input checked="" type="checkbox"/>
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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.