

## CREDIT APPLICATION

COMPANY'S LEGAL NAME \_\_\_\_\_

HOME OFFICE ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_ WEBSITE \_\_\_\_\_

CORPORATION

PARTNERSHIP

INDIVIDUAL

BRANCH OFFICE \_\_\_\_\_ DBA NAME \_\_\_\_\_

BRANCH OFFICE ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_ WEBSITE \_\_\_\_\_

STANDARD SCOPE OF WORK \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ JOB TITLE \_\_\_\_\_

CONTACT EMAIL \_\_\_\_\_ CONTACT TELEPHONE \_\_\_\_\_

YEAR COMPANY WAS ESTABLISHED \_\_\_\_\_ PRINCIPAL'S NAME \_\_\_\_\_

PRINCIPAL'S I.D. / LICENSE \_\_\_\_\_

### CREDIT REFERENCES

FIRM \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

\_\_\_\_\_  
TELEPHONE \_\_\_\_\_

FIRM \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

\_\_\_\_\_  
TELEPHONE \_\_\_\_\_

FIRM \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

\_\_\_\_\_  
TELEPHONE \_\_\_\_\_

**BANK REFERENCE**

**BANK NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**SALES TAX EXEMPT**  **YES**  **NO** **EIN** \_\_\_\_\_

**PURCHASE ORDER REQUIRED**  **YES**  **NO**

**PERSONS AUTHORIZED TO ORDER EQUIPMENT AND SUPPLIES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. The Company and Principal Responsible hereby agree to both be personally for the payment of services and goods to Equipment Rental Service, Inc. Payment is due UPON RECEIPT. Accounts shall be suspended when balances exceed 30 days. Client also agrees to pay all costs of collection including attorney's fees, court costs and processing fees. All invoices for work performed are DUE UPON RECEIPT.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_ **TITLE** \_\_\_\_\_



**DO NOT WRITE BELOW**

*EQUIPMENT RENTAL SERVICE, INC. MANAGEMENT ONLY*

Sunbiz Checked      Initials \_\_\_\_\_

References Checked      Initials \_\_\_\_\_

Copy of Principal's I.D.      Initials \_\_\_\_\_