



SALES • RENTALS • PARTS • SERVICE • JOBSITE PMs

Credit Application

Customer Name: _____
(Please use full legal name.)

Street Address: _____

Mailing Address: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

KEY OFFICERS or PRICIPALS IN BUSINESS

Name: _____

Name: _____

Is your business a:
Corporation? _____ Partnership? _____ Proprietorship? _____ Fed ID No. _____

Is a P.O. required? _____ Sales Tax Exempt? _____ If yes, please attach exemption certificate.

BANK REFERENCE

Bank Name: _____ Phone No. _____

Address: _____

Bank Officer: _____ City _____ State _____ Zip _____
Account No. _____

CREDIT/FINANCE REFERENCES

1. Name: _____ Phone No. _____

Address: _____ Fax No. _____

2. Name: _____ Phone No. _____

Address: _____ Fax No. _____

3. Name: _____ Phone No. _____

Address: _____ Fax No. _____

Signature _____ Title _____ Date _____

TERMS: Subject to credit approval, all invoices for parts or service work are due NET 15 days from date of purchase.
A late charge of 1.5% per month may be added for any charges that fall 15 days past due date.