



CREDIT APPLICATION

For Commercial Accounts

(586) 445 - 1593
 Fax (586) 445 - 6274
 14711 E. Nine Mile
 East Pointe MI 48021

<p style="text-align: center;">Bill To:</p> <p>Exact Name: _____ Subsidiary of: _____ Mailing Address: _____ City: _____ State: _____ Zip Code: _____ Phone Number: _____</p>	<p style="text-align: center;">Ship To:</p> <p>Company Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ Phone Number: _____ Fax Number: _____</p>
<p style="text-align: center;">General Business Information</p> <p>Type of business: _____ Years in business: _____ DBA: Corporation _____ Partnership _____ Individual _____ Officer: _____ Title: _____ Officer: _____ Title: _____ Years of Incorporation: _____ State of Incorporation: _____</p>	<p style="text-align: center;">Are You Tax Exempt?</p> <p>No: _____ Yes _____ Please include tax certificate with application</p> <p style="text-align: center;">Accounts Payable Contact:</p> <p>Name: _____ Phone Number: _____ Fax Number: _____</p>
<p style="text-align: center;">Do You Require?</p> <p>A purchase order? yes/no If yes, does it have to be written? yes/no Job location? yes/no Job number? yes/no Limit rentals and sales to certain persons? yes/no If yes, please list those authorized to use this account in the spaces to the right. Are we allowed to rent ANY person driving your company vehicles even if the person's name is NOT on the list? yes/no Note: We photocopy drivers license of all individuals picking up equipment.</p>	<p style="text-align: center;">Authorized Users</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <p>Note: It is the customer's responsibility to update this list periodically.</p>
<p>Bank Reference</p>	
<p>Bank Name: _____ Officer: _____ City: _____ State: _____ Zip: _____ Phone No: _____ Account No: _____</p>	
<p>Business Credit References (Minimum of three)</p>	
Name	Address, City
Fax No.	Phone No.
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
<p>Liability & Theft Insurance Carrier: _____ Agent's Name: _____ Policy Number: _____ Agent's Phone No: _____</p>	
<p>Terms: Net 30 days. A finance charge of 1.5% per month will be charged on all invoices over 30 days.</p>	
<p>We certify that all information is this form is correct and that we fully understand your credit terms and agree to the proper payment in consideration of extended credit. We also certify as a condition of opening this charge account, we will provide Lewis Equipment Co. with a proof of insurance against theft of rented equipment as well as an additional insured on customer liability insurance policy. We authorize Lewis Equipment Co. or its agents to investigate my/our financial responsibility and credit worthiness and reliability. Customer is responsible for theft, abuse, and vandalism on equipment.</p>	
<p>Signed: _____ Type or Print: _____ Title: _____ Date: _____</p>	