



CREDIT APPLICATION

Equip Rental and Sales, LLC
 420 S Church St.
 St. Peters, MO. 63376
 Phone 636-397-8080 / Fax 636-397-5222

COMPANY INFORMATION

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

Acct. Payable Contact: _____ Phone: _____

E-Mail Address (Invoices/Statements): _____

Nature of Business: _____

Does your company require purchase orders? YES NO Year Business Began: _____

Is the Company a: PROPRIETORSHIP PARTNERSHIP CORPORATION (Check One)

PRINCIPAL OWNERS OR OFFICERS

NAME	TITLE	HOME ADDRESS (street, city, zip)	PHONE
1.			
2.			
3.			
4.			

BANK INFORMATION

ACCT TYPE	ACCT NUMBER	BANK NAME	BANK CONTACT	PHONE
1.				
2.				
3.				

CREDIT REFERENCES - (Include complete addresses with zip codes):

NAME	ADDRESS	PHONE/FAX
1.		
2.		
3.		

AUTHORIZED PURCHASERS / RENTERS - Please list persons authorized to rent and/or purchase equipment.
 (Applicant is responsible to periodically update list.)

FIRST NAME	LAST NAME	PHONE 1	PHONE 2
1.			
2.			
3.			
4.			
5.			
6.			

NOTICE: Our billing department will mail all invoices directly to your accounts payable office. These invoices are due and payable by the tenth of the month following the date of the invoices. A statement will also be issued at the end of each month as a summary of all invoices which have been mailed to you previously. All accounts past thirty days will be subject to a 1.5% finance charge and open account privileges may be revoked.

CREDIT TERMS & CONDITIONS

In consideration of the opening of an account in the name of: _____
 by and with Equip Rental and Sales, LLC and the extension of credit by the charging of rentals, merchandise and services to said account, the undersigned individually, jointly, and severally do agree to guarantee to pay by the tenth (10th) of the month following the date of the invoice, any amount due and owing, together with all Attorney's fees in the event any portion of said account is placed with an Attorney for collection. I/We also understand that a 1.5% finance charge will be added each month to all accounts past 30 days.

Owner/Officer _____ Title _____

Print Name _____ Date _____

INDIVIDUAL CREDIT GUARANTY

PERSONAL CREDIT INFORMATION

First Name _____ Initial _____ Last Name _____

Birth Date _____ Social Security _____ Check One: Married Single

SPOUSAL INFORMATION - REQUIRED IF MARRIED

First Name _____ Initial _____ Last Name _____

Birth Date _____ Social Security _____

Current Home Address (Number/Street) _____

City _____ State _____ Zip Code _____ - _____ Home Phone () _____

BANK REFERENCES

ACCT TYPE	ACCT NUMBER	BANK NAME	BANK CONTACT	PHONE
1.				()
2.				()

GUARANTY, given by the undersigned to Equip Rental and sales, LLC, a Missouri Corporation, Of St. Peters, Missouri, in order to induce Equip Rental and Sales LLC to extend credit to the below signed individual (s) hereinafter called the "Guarantor (s)". The undersigned hereby guarantees to Equip Rental and Sales, LLC the prompt payment, when due, of any and all obligations or indebtedness to Equip Rental and sales, LLC from the Guarantor (s), without deduction for any setoff or counterclaim of the Guarantor (s), the obligation of the undersigned under this guaranty is a primary and unconditional obligation and covers all existing and future indebtedness of the guarantor (s) to Equip Rental and Sales LLC. The Guarantor (s) agrees to pay all expenses including collection costs and attorney fees incurred by Equip Rental and Sales LLC in an attempt to enforce this Guaranty. This is a continuing Guaranty and shall remain in force until written revocation sent by the undersigned by registered mail is received by Equip Rental and Sales, LLC and agreed upon, which revocation shall be effective only as to obligations or indebtedness of the Guarantor (s) to Equip Rental and Sales arising out of transactions entered into after receipt of such notice. The undersigned Guarantor (s) accepts terms of the documents and authorizes Equip Rental and Sales LLC to investigate all references provided.

Signature _____ Print Name _____ Date _____

(Guarantor Signature)

If married, both signatures required:

Spouse's Signature _____ Print Name _____ Date _____

