



AUTO-PAY APPLICATION

Equip Rental and Sales, LLC.

420 S Church St.

St. Peters, MO. 63376

Phone (636) 397-8080 | Fax (636) 397-5222

custservicestp@equiprentalsales.com

COMPANY INFORMATION

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

Contact: _____ Phone: _____

Email: _____

Nature of Business: _____

Does your company require Purchase Orders? YES NO Year Business Began: _____

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

PRINCIPAL OWNERS OR OFFICERS

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

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 I	EMAIL
1.			
2.			
3.			
4.			
5.			

Owner/Officer: _____

Title: _____

Print Name: _____

Date: _____

