Credit Application for a Business Account

	11 Vreeland Phone 914-592	Ave. Elmsford NY 2 2-2016 Fax 914-59	2-1635	THIS COLUMN FOR OFFICE USE	
Business Contact Information			<u> </u>	ONLY	
Company name:				Bank Contact:	
Phone:	Fax:		E-mail:		
Registered company address: Billing Address if different:				Verification:	
City:			ZIP Code:		
Date business commenced:		·			
Sole proprietorship:	Partnership:	Corporation:	Other:	Date:	
How long at current address?					
Business/Credit References					
Bank name:		Phone	Phone		
Contact:					
ank address:		FAX:	FAX:		
City:		State:	ZIP Code:		
Type of account	Account num	iber:		Contact:	
Company name:					
Address:				Date:	
City:	ty:		ZIP Code:		
Phone:	Fax:		ount:		
Company name:	I			Contact:	
Address:				Contact:	
City:			ZIP Code:	Date:	
Phone:	Fax:	Type of acc	ount:		
Company name:	I			Cantach	
Address:				Contact:	
City:		State:	ZIP Code:	Date:	
Phone:	Fax:	Type of acc	ount:	Dute.	
I,(YOUR NAME)		, do personally	/ guarantee payment f	1 or all	
debts incurred by:					
I understand that there will be old from date on invoice. I further agree that sh fees and costs incurred may b	ould it become neo	cessary to take legal			
Signed:		Print Name:			
Home Address (no PO Bx's)					
Date of Birth:	Drivers	Licence#:	SS#		
WTR/PLR offers a "hou convenience and the terms of					

All accounts must pay all invoices within 30 days from date of invoice or pay interest of 2% per month on invoices over 60 days (24% per year). If you choose not to pay interest, your account will be closed until paid. We are in the rental business not the finance business. All customers are given a pink invoice receipt at time of rental or sale. A yellow copy is then mailed followed by a monthly statement. If you are missing an invoice we will send 1 copy. If additional copies of the same invoice are required, there will be an invoice copy charge of \$5.00 each. For your convenience, WTR/PLR also offers credit card charge accounts. We automatically charge yo credit card (AMX, Visa, M/C or Discover) upon completion of an invoice. This type of account gives you and your employees the same services of a "house" charge that is sign and go. We offer added services to accommodate your needs, please mark accordingly. 1. Damage Waiver (DW) is 10% of the rental cost and can be automatically charged to each rental invoice. By accepting, WTR waives any claim against you for accidental damage to equipment rented*. Damage Waiver: YES NO				
Vandalism, theft or abuse of equipment is not covered. If the damage waiver is not offered by WTR/PLR on a specific item, it will be noted on the rental contract.				
2. Do you require Purchase Orders: YES NO				
3. Do you require Job Sites: YES NO				
 Special customer requirements for billing will be accommodated by WTR if they are within our computer capabilities. Special Requirements: 				
For YOUR convenience and protection please list authorized personnel to charge on your account: (Please Print, First and Last Name)				
122222				
34				
If additional personnel are authorized to charge, please submit on additional paper attached to this form. It is your responsibility to keep this list up to date. We reserve the right to verify or require identification from any person signing on your account. You must notify WTR of any unauthorized charges in writing, to your account immediately, if we are not notified, the charge(s) stand. Please be advised that an authorized signature on our contract is an agreement to all terms and conditions of that contract. We must be notified immediately of any changes to your account, in writing, or your account may be closed at our discretion.				
Signed:Date:				
(Please retain a copy of this application for your records)				
THIS AREA FOR OFFICE USE ONLY				
Approved: Denied: Date: Signed:				
Notes:				

Please note: This application for credit consists of 2 pages; <u>all fields</u> must be completed for your application to be considered.