

CREDIT APPLICATION

Company Name		Parent Company			
Billing Address		City/State/Zip			
Physical Address		City/State/7in			
		City/State/Zip)		
Phone Cell		Email			
DOT# FEIN		Year Establis	hed	State	
D&B					
Business Structure		-	<u>o Parent Co</u>		
C-Corp S-Corp LLC LP	Proprietorship	Subsid	diary	Division	Branch
	Account Pref				
Desired Account Type Equipment R	Maximum Credit Desired				
(check all that apply)					
Purchase Orders Required	AP Contact Phone #				
AP Contact Name		AP Contact Email Address			
Tax Exempt Status					
We elect to receive invoices & statement via email					
We hereby warrant the information listed above is Truck") and its affiliates permission to investigate					
we shall be charged and agree to pay Custom Truck a late charge in the amount of 1.5% per month on the unpaid balance together with all costs and expenses (including reasonable attorneys' fees, collection agency fees and disbursements) incurred by Custom Truck in connection with collecting any					
payments due, including, without limitation any costs and expenses incurred in any litigation commenced in connection therewith. The person executing this agreement has the authority to enter into this credit application terms and conditions.					e person executing
Printed Name of Authorized Agent:			Title		
-					
Signature of Authorized Agent:			Date		

FOR EQUIPMENT RENTAL PLEASE INCLUDE YOUR CERTIFICATE OF LIABILITY INSURANCE