

CREDIT APPLICATION

BUSINESS INFORMATION

Company Name _____ Years in Business _____
Street Address _____ Federal ID # _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____ E-mail _____
Mailing Address _____ City _____ State _____ Zip _____
Business: () Corporation () LLC () Partnership () Sole Proprietorship () Other _____
Sales Tax I.D. _____ State _____ A/P Contact _____
Type of Business _____ PO Required: () Yes () No
Credit Line Amount Requested _____ D&B Listed? () YES # _____ () No

OWNERS OR PRINCIPALS

1. Name of Officer _____ Title _____
Home Address _____ Phone _____
City, State, Zip _____ SS# _____
2. Name of Officer _____ Title _____
Home Address _____ Phone _____
City, State, Zip _____ SS# _____

BANK INFORMATION

Name of Bank _____ Contact Name _____
Address _____ City _____ State _____ Zip _____
Phone _____ Fax _____ E-mail _____ Account # _____

TRADE REFERENCES

1. Name _____
Address _____ City _____ State _____ Zip _____
Phone _____ Fax _____ E-mail _____ Contact _____
Vendor Service or Product Line _____
2. Name _____
Address _____ City _____ State _____ Zip _____
Phone _____ Fax _____ E-mail _____ Contact _____
Vendor Service or Product Line _____
3. Name _____
Address _____ City _____ State _____ Zip _____
Phone _____ Fax _____ E-mail _____ Contact _____
Vendor Service or Product Line _____

I hereby authorize LA Equipment Services, or its agents, to investigate my credit worthiness and will provide financial statements, tax returns etc. as deem necessary. I agree to pay LA Equipment Services interest at 1.5% per month on any outstanding balance beyond the terms started on the invoice. Further, I agree to pay LA Equipment Services reasonable attorney's fees and collection costs if I default on any debt to LA Equipment Services and the account is placed in the hands of an attorney or collection agency.

Signature Title Date