

Highland Equipment Rental

27111 E. 5th St.
Highland, CA 92346
Phone 909-864-1810
Fax 909-864-1478

APPLICATION FOR CREDIT

Date _____

FIRM NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE () _____ FAX () _____ CORP. PARTNERSHIP SOLE PROP.

OFFICERS _____ TITLE _____ TITLE _____

_____ TITLE _____ TITLE _____

DRIVERS LIC. (PARTNERSHIP OR SOLE PROPRIETOR) _____ SOCIAL SEC. # _____

TYPE OF BUSINESS _____ YEAR ESTABLISHED _____

AT PRESENT LOCATION SINCE _____ CONTRACTORS LICENSE NUMBER _____

PRESENT LOCATION—OWNED RENTED

BANK _____ ADDRESS _____ CITY _____

STATE _____ ZIP _____ TELEPHONE NUMBER _____

ACCOUNT NUMBER _____ PERSON TO CONTACT _____

REFERENCES: LIST THE NAMES, ADDRESS & TELEPHONE NUMBER (AT LEAST 3 REFERENCES REQUIRED)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PURCHASE ORDER REQUIRED: YES NO

LIST NAMES OF PERSONS AUTHORIZED TO SIGN ON ACCOUNT:

_____	_____	_____	_____
_____	_____	_____	_____

ALL INVOICES ARE DUE AND PAYABLE WITHIN 30 DAYS. IF NOT PAID WITHIN 45 DAYS YOUR ACCOUNT WILL BE PLACED ON C.O.D. IF NOT PAID AFTER 60 DAYS ACCOUNT WILL BE DELETED, AND CREDIT MUST BE RE-ESTABLISHED. IN THE EVENT YOU DO NOT FURNISH *HIGHLAND EQ. RENTAL* WITH AN AUTHORIZED LIST OF PERSONNEL WHO MAY CHARGE, YOU WILL BE LIABLE FOR ALL CHARGES TO YOUR ACCOUNT. ANY ADDITIONS OR DELETIONS MUST BE IN WRITING ON YOUR COMPANY LETTERHEAD. I AGREE TO PAY ALL COLLECTION COSTS INCURRED BY *HIGHLAND EQ. RENTAL*, IN THE EVENT MY ACCOUNT IS NOT PAID ACCORDING TO THESE TERMS.

I AGREE TO THE ABOVE TERMS AND CONDITIONS: SIGNED _____

DATE _____ PRINT NAME _____ TITLE _____