

Credit Application

Please complete the form below and fax it back to us, so that we can process it quickly for you.

For the purpose of obtaining merchandise and rental equipment on credit, the following made in writing is warranted to be true, intending that you should rely on the same as correct. The applicant hereby authorizes Cone Zone Equipment Rentals, and/ or its agents to whom this application is made, to investigate the references listed below to ascertain the undersigned personnel, partnership, or corporate credit and financial information.

Person to Contact: _____ Applicant: _____

Name of Business: _____

Mailing Address: _____

Street Address: (if different) _____

Business Phone: _____ Business Fax Number: _____

Business Type: Corporation Partnership Proprietorship Federal Tax I.D. No.: _____

Please List All Owners and/or Corporate Officers:

Print Name Print Title

Print Name Print Title

Print Name Print Title

Date Business Started: _____ Current Owners Since: _____

Former Employment of Owner(s) if Business is Less Than 2 Years Old:

Company Name From: (month/year) To: (month/year)

Company Name From: (month/year) To: (month/year)

Company Name From: (month/year) To: (month/year)

Contractor's Licenses Held:

State	Classification	License No.	Name Issued Under
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Bank Information:

Bank Name: _____ Branch: _____

Branch Address: _____

Account Representative: _____ Phone No.: _____

Account Number(s): _____ Checking Savings

_____ Checking Savings

Credit Information:

Please list credit references with complete company name, address, phone number, and contact:

Company Name

Address

City, State Zip

Contact Name Fax Number

Company Name

Address

City, State Zip

Contact Name Fax Number

How Did You Hear About Our Company?

Yellow Pages (which one?) _____ Blue Book ThomasNet SDS Communications

Dahls Salesperson (name) _____ Internet (search engine) _____

Agreement:

The undersigned agrees to all the terms and conditions of sale. Terms and conditions are subject to change without notice. Purchaser agrees to pay all costs of collection, including court costs and all reasonable attorney's fees in case suit or collection action is commenced to collect part or all of this account. Payment terms are net 30 days, and finance charges are accrued at 1.5% per month on the balance owing past 30 days.

Date: _____

Company Name: _____

Print Name: _____ Title: _____

Signature: _____

Insurance Certificate Request

As a renter of our equipment and a patron of our business, our insurance company requires that we obtain evidence that you currently have insurance for your operations.

With this in mind, we are formally requesting that you forward this letter to your insurance agency so that they can provide us with a Certificate of Insurance which contains the following:

- Commercial General Liability Coverage and Occurrence form
- Automobile Liability coverage, including non-owned and hired autos
- Workers Compensation Coverage, including Employer's Liability
- Contractor's Equipment Coverage, which includes equipment which is hired, leased, or borrowed
- Additional Insured endorsement in favor of Cone Zone Equipment.
- 30-day advance notice of cancellation and/or material change in policy coverage

We would greatly appreciate receipt of said evidence within 30 days of the completion of the credit application. Thank you for your cooperation, and we look forward to the opportunity of serving all of your equipment rental needs.