Credit Agreement & Application

EP|RENTS
EQUIPMENT SOLUTIONS

APPLICANT	**Last:**		**First:**		**Middle Initial:**
	Title:		**Name of Business:**		**Federal Tax I.D. Number:**
	Address:				**City:**
	State:		**Zip:**		**Email:**
	Phone:		**Fax:**		**Credit Limit Requesting:**
COMPANY INFORMATION	**Type of Business:**		**Email:**		**In Business Since:**
	Legal Form Under Which Business Operates:				
	If Division/subsidiary, Name of Parent Company:				**In Business Since:**
	Name of company Principal Responsible for Business transactions:				**Title:**
	Address:				**Phone:**
	City:	**State:**	**Zip:**		
	Are Purchase Orders Required:	**Tax Exempt #: _____ if so, Fax Exempt Certificate to 407.798.0013**			
	Business Country:	**Dun & Bradstreet Number_____ Rating (Credit Reports Obtained)**			
BANK REFERENCES	**Institution Name:**		**Institution Name:**		**Institution Name:**
	Checking Account No.:		**Savings Account No.:**		**Home Equity Loan:** / **Loan Balance:**
	Address:		**Address:**		**Address:**
	Phone:		**Phone:**		**Phone:**
TRADE REFERENCES	Company Name:		**Company Name:**		**Company Name:**
	Contact Name:		**Contact Name:**		**Contact Name:**
	Address:		**Address:**		**Address:**
	E-Mail:		**E-Mail:**		**E-Mail:**
	Fax:	**Acct. Opened Since**	**Fax:**	**Acct. Opened Since**	**Fax:** / **Acct. Opened Since**

**** MUST READ & SIGN BELOW CREDIT TERMS****

"Applicant" means each individual/sole proprietor or legal entity indicated above. **For an individual, use full legal name (first, middle or initial, and last) exactly as it appears on a current, valid driver's license (including hyphens, spaces and suffixes). For legal entity use full legal name of the entity. **REPRESENTATIONS:** By signing below, I represent that (i) if I am an Applicant indicated above, I am signing individually, (ii) for each entity that is an Applicant indicated above, either I or another signer below is signing as an authorized representative of such Applicant, and (iii) the information contained in this Application is true and complete. A copy of these authorizations shall be valid as the original. The following authorizations (i) apply to this Application and subsequently for purposes of extending, reviewing, updating, and collecting credit. We reserve the right to modify the credit terms at any time. **AUTHORIZATIONS:** By signing below, I (individually and on behalf of any entity, as the case may be) hereby authorize: (i) Credit report agencies, Applicant's banks and other third parties to provide Credit Information to EP Rents LLC

Signature _____ Title _____ Date _____

We accept all major credit cards.

Fax to Lynne Jones. Fax: 407.798.0013 or E-Mail: accountsreceivable@myepg.com