

# GENERAL



## Equipment and Supply

P.O. Box 80489  
Simpsonville, SC 29680-0489

Phone: 864-243-5452  
Fax: 864-243-4666

**Salesperson Initials:** \_\_\_\_\_  
**APPLICATION FOR COMMERCIAL CREDIT ONLY**

Applicant authorizes General Equipment and Supply to check all credit references and information provided and to utilize all other credit sources deemed necessary by General Equipment and Supply to determine the Applicant's creditworthiness.

**LEGAL NAME OF BUSINESS** \_\_\_\_\_ **Date Business Started:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_ County: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Ownership: Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ Limited Liability \_\_\_\_\_

**Principal Owner(s) or Officer(s) are:**

Name: \_\_\_\_\_ Resident Address: \_\_\_\_\_ Title: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Annual Sales \$ \_\_\_\_\_ Number of Employees: \_\_\_\_\_

State of Incorporation: \_\_\_\_\_ Date of Incorporation: \_\_\_\_\_ Federal Id# \_\_\_\_\_

Purchase Order required \_\_\_\_\_ Sales Tax Exemption # \_\_\_\_\_ (If exempt, attach Certificate)

Accounts Payable Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Credit References** (Please include account numbers where applicable)

Name	Address	Telephone and Fax Numbers
Supplier: _____	_____	_____
Supplier: _____	_____	_____
Supplier: _____	_____	_____
Supplier: _____	_____	_____
Supplier: _____	_____	_____

Do you carry insurance that covers equipment you would rent from our company? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please attach copy of current insurance certificate with list General Equipment and Supply as an Additional Insured/Loss Payee. Loss Damage Waiver is charged on all rental invoices for accounts that do not have this certificate on file.

Applicant agrees to General Equipment and Supply's terms of "Net 30 Days" from date of invoice for Rental items, New and Used equipment. On surplus items, terms are "Net Due on Receipt of Goods". Applicant agrees that venue and jurisdiction for any legal proceeding to collect any amount due by Applicant to General Equipment and Supply may be brought, at General Equipment's option, in the city or county where payment is due as shown on the invoice. Applicant also agrees to pay attorney's fees and court costs as may be incurred by General Equipment and Supply in the collection of applicant's debt owed to General Equipment and Supply. THE CONSTRUCTION, PERFORMANCE AND ENFORCEMENT OF THESE TERMS AND CONDITIONS SHALL BE GOVERNED BY THE LAWS OF THE STATE WHERE PAYMENTS ARE DUE.

\_\_\_\_\_  
Name of Company Business

\_\_\_\_\_  
Applicant's Signature and Title

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
If Partnership, both or all partners must sign