

INDIVIDUAL ACCOUNT APPLICATION FOR CREDIT

Name	Spouse		_
Home Address	Phone #		
City	State	Zip	=
Social Security #	Spouse #		
Drivers license #	Spouse #		
Cell Phone #	Spouse#		_
Fax #	Email		_
Employment			
Employed By	Spouse		
Phone #	Spouse		_
	Spouse		
Banking			
	Checking?		
Account #	Savings Phone #		_
Contact	Phone #	Fax #	_
Credit References (must have	at least 3 with completed information)		
1	Phone#	Fax	_
2	Phone#	Fax	_
3	Phone#	Fax	_
Do you own your home or rea	nt ?		_
List Major Creditors			_
If you are building your own	home please list financial institution	Phone#	_
	Credit Terms		
1.Under the terms of our regu	lar 30-day accounts, the entire amount		fore the 10 th day of
the month following purcha			
2. If the full amount of all pur FINANCE CHARGE on the	chases are not paid within 30 days from remaning balance.	the date of billing, the customer	r agrees to pay a
3. Under the provisions of the Mechanics Lien Act, a mechanics lien may be filed against real estate to or which services			
have been incorporated if payment for said services is not made when due.			
	es the right of seller to exercise legal acti		g statue which may
be in effect in the state.	8	7 11	,
5. By submitting this applicat	ion, you authorize A-1 Rental Inc, to ma	ke inquires into the banking and	l business/ trade
references that you have supp		1 8	
Applicants Signature		Spouse	
Special Terms			
	eredit, the undersigned agrees to pay the account in	accordance with the Companies credit	terms. In the event of non-

payment and the account is placed with an attorney or collection agency for collections. I/we agree to pay collection fees or actual attorneys fees incurred by A-1 Rental Inc, which may be up to 35% of the indebtness. By signing this application, I also herby authorize the firm to which I am applying credit, or credit bureau to investigate the references herin listed

PLEASE FAX COMPLETED CREDIT APPLICATION TO (208) 356-3618 THANK YOU