



For Office Use Only:		
Sales Person:	Rep#	Loc#

## APPLICATION FOR CREDIT & RETAIL CHARGE AGREEMENT

225-753-2332 **PH** 225-753-6373 **FX** 13764 Airline Highway, Baton Rouge, LA 70817

### COMPANY INFORMATION

Company or Corporation Name (Name if Individual) \_\_\_\_\_

Physical Street Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Billing Address (IF DIFFERENT) \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

FORM OF OWNERSHIP  Individual  Partnership  Corporation (Fed Tax ID # \_\_\_\_\_)

Type of Business \_\_\_\_\_ Established \_\_\_\_\_ Duns No. \_\_\_\_\_

Owner's/Partners Name(s) \_\_\_\_\_ Address \_\_\_\_\_ Title \_\_\_\_\_

Taxable Yes  No  (If No, Tax Exemption Certificate Required)  
 Do you Require Purchase Orders? Yes  No  Do you Require Job No's? Yes  No   
 Credit Line requested? \$ \_\_\_\_\_

### BANKING & TRADE REFERENCES

Bank Name \_\_\_\_\_ Bank Officer \_\_\_\_\_ Phone \_\_\_\_\_

Has this company or any officers, directors, or owners of the company ever filed a voluntary petition in bankruptcy, been adjusted bankrupt or made an assignment for the benefit of creditors?

Yes  No  If yes, who and when? \_\_\_\_\_

Has a tax lien or civil suit ever been filed against this company or any of its officers, directors or owners within the past five years?

Yes  No  If yes, please explain: \_\_\_\_\_

#### CREDIT REFERENCES (AT LEAST 3 MUST BE PROVIDED)

NAME	PHONE	FAX (REQUIRED)
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## TERMS AND CONDITIONS OF CREDIT

### Terms & Conditions must be signed in order to process application

This application is submitted by the undersigned (hereinafter referred to as "Applicant") for the purpose of obtaining a charge account with Aerial Access Equipment. All representations are accurate, complete and truthful to the best of the Applicant's knowledge and belief.

The Applicant hereby authorizes any individual, firm or corporation given as credit reference to disclose to Aerial Access Equipment orally or in writing, any information which is pertinent to this application.

If the Applicant is a corporation, the undersigned affirmatively states that he is authorized to make application on behalf of said corporation and to obligate same for any credit extended thereto as a result of this application; and further that the corporation on whose behalf application is hereby made will continue to be bound and obligated for any credit advanced thereto until notice to the contrary is given in writing to Aerial Access Equipment at 13764 Airline Highway, Baton Rouge, Louisiana, 70817.

If Applicant presents a Financial Statement as a part of this application, it will be attached hereto and made a part of hereof. Applicant agrees to submit Financial Statement as requested by Aerial Access Equipment. Any Financial Statements submitted in connection with this application or as requested by Aerial Access Equipment will be accurate, complete and truthful.

Credit extended by Aerial Access Equipment to Applicant shall be due when billed to Applicant. Applicant agrees to pay the amount due within 30 days following the due date to avoid a FINANCE CHARGE. If Applicant's account becomes 30 days past due, it will be subject to a FINANCE CHARGE OF 1.5% per month on the outstanding amount. This is an ANNUAL PERCENTAGE RATE OF 18%. It is expressly understood by Applicant that the existence of the FINANCE CHARGE does not affect Applicant's obligation to pay the account in full when due. Applicant's account will be delinquent when any part of the account is 30 days past due.

If this account is not paid in full when due, and it is placed for collection, Applicant agrees to all court costs and an amount equal to 25% of outstanding principal and interest as attorney's fees, collection costs or any other cost incurred in the collection of such indebtedness.

**Applicant is required to provide our company with a valid insurance certificate reflecting General Liability coverage with minimum limits of \$1M and Rented/Leased Equipment Coverage with minimum limits of \$100,000 per item. Our company is to be named as additional insured and loss payee under these policies.**

**NOTICE TO APPLICANT - DO NOT SIGN THIS AGREEMENT UNTIL YOU HAVE READ IT. YOU ARE ENTITLED TO A COPY OF THE SIGNED AGREEMENT.** I/We apply for credit and will abide by the terms and conditions of Aerial Access Equipment, I understand, acknowledge and accept these terms and conditions.

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Signature

Printed Name

Date

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Title/Position

Social Security No (Required)

Financial Statement Attached Yes  No

## PERSONAL GUARANTY

**FOR VALUE RECEIVED**, the undersigned does guarantee payment of all amounts advanced by Aerial Access Equipment to Applicant if Applicant defaults in its payment of any indebtedness. If this account is not paid in full when due and is placed for collection, the undersigned shall also pay to Aerial Access Equipment an amount equal to all court costs and an additional 25% on principal and interest as attorney's fees, collection costs or any other costs incurred in the collection of such indebtedness. This is a continuing guaranty and shall remain in full force until the undersigned delivers to Aerial Access Equipment written notice revoking it as to indebtedness incurred subsequent to such delivery.

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Signature

Printed Name

Date

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Home Address

Social Security No.