

CREDIT APPLICATION

**FONTY'S RENTAL CENTER
2204 WEST 5TH STREET
PLAINVIEW, TX 79072
Tel: (806) 293-4922 Fax: (806) 296-9204
fontysrental@sbcglobal.net**

Company name		
Street/ Mailing Address		
City	State	Zip
Phone Number		
Fax Number		
Email Address		

Accounts payable contact person
Telephone and ext #
fax #
Resale Number
Federal ID Number

Form of Organization: _____ Corporation _____ Partnership _____ Sole Proprietorship

Nature of Business _____ Years in Business at Present Address _____

BUSINESS REFERENCES

Company Name	City, State, Zip	Fax #	Phone #
1			
2			
3			
4			

BANK REFERENCE (Include Bank Name, Branch, Address, Contact, & Telephone #)

PRINCIPALS OF COMPANY (Include Name, Title, Telephone #)

_____ Check Here if You Require Purchase Orders

All accounts are due on the 20th of the month following billing. Past due accounts will be charged a late fee of 1 1/2% per month (18% per annum) or a \$.50 minimum whichever is greater.

We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

Authorized Signature	Print Name/ Title	Date
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