

ALLIED CRANE SERVICE, INC. PO BOX 7586 NAPLES, FL 34101 Phone: 239/597-3445		<u>CREDIT APPLICATION FORM</u> Please complete, sign and return this form. Fax Forms and Purchase Orders to: Fax: 239/597-4413	
Billing Address:		Office Address:	
Company Name		Company Name	
Attention		Attention	
Mailing Address		Street Address	
City, State, Zip		City, State, Zip	
Telephone		Telephone	
Fax		Fax	
Are Premises Leased? <input type="checkbox"/> Yes <input type="checkbox"/> No		Years at this address _____	
General Information			
Federal Tax ID No.	Company <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation		Corporation State of
Principal/Owner	Title	Email	Amount of Credit Desired
Ordering Information			
Are Purchase Orders Required? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Check here if cash sales are okay until credit is approved.	
Purchasing Agent	Fax	Email	Phone No.
Accounts Payable Contact	Fax	Email	Phone No.
Bank Information			
Bank Name	Branch Name	Bank Contact Officer	Phone No.
Bank Address	City	State, Zip	Type of Account and Account No.
References:			
Name and address		Phone No.	Fax No.
1.			
2.			
3.			
4.			
Terms and Conditions			
All accounts are COD until a credit application has been completed, reviewed, and approved. If any indebtedness incurred pursuant to this request for credit is not paid in full when due, the undersigned agrees to pay all costs of collection, including a reasonable attorney's fee. Any balance so remaining unpaid shall bear interest at the lesser rate of 1.5% per month or the maximum rate permitted by applicable law, until paid in full.			
Acceptance and Approval			
Signing this agreement indicates your acceptance of the terms and conditions as stated. In addition, you authorize Allied Crane Service Inc. to make any and all inquiries necessary to process this Credit Application.			
Name of Authorized Representative		Title	
Signature	Phone No.	Date	