

**CREDIT APPLICATION FOR CORPORATIONS  
WITH  
VALLEY RENTAL CENTERS, INC.**

810 9Th St. SW  
Hickory, NC 28602  
**Mary Ann Nelson, Mgr.**  
Ph.828-326-0911  
Fax 828-326-9009

**This Form may be completed  
and printed online if desired.**

1401 Morganton Blvd.  
Lenoir, NC 28645  
**Dean Price, Mgr.**  
Ph. 828-758-7400  
Fax 828-758-0121

**Corporate Name:** \_\_\_\_\_ **Fed. ID #** \_\_\_\_\_ **Sales Tax No.** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

Home/Office Phone( ) \_\_\_\_\_ - \_\_\_\_\_ Fax( ) \_\_\_\_\_ - \_\_\_\_\_ Jobsite Phone( ) \_\_\_\_\_ - \_\_\_\_\_ Mobile( ) \_\_\_\_\_ - \_\_\_\_\_

What do you require on invoices? \_\_\_\_\_

Who is authorized to make purchases? \_\_\_\_\_

**Corporate Officers** (Please Print): Pres. \_\_\_\_\_ V.P. \_\_\_\_\_ Sec. \_\_\_\_\_

Email Address(s) \_\_\_\_\_

**References:**

- |   |   |   |
|---|---|---|
| 1. <b>Name:</b> _____<br><b>Address:</b> _____<br>_____<br><b>Telephone #</b> _____<br><b>Fax #</b> _____ | 2. <b>Name:</b> _____<br><b>Address:</b> _____<br>_____<br><b>Telephone #</b> _____<br><b>Fax #</b> _____ | 3. <b>Name:</b> _____<br><b>Address:</b> _____<br>_____<br><b>Telephone #</b> _____<br><b>Fax #</b> _____ |
|---|---|---|

Bank: \_\_\_\_\_ Account #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bank Officer's Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

**APPLICANT'S SIGNATURE ATTESTS ACCEPTANCE OF AGREEMENT, FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH FOLLOWING TERM AND CONDITIONS:**

**Terms:** Net 10th All invoices billed by the 25th of a month are due by the 10th of the following month. Past due charges(1.5% per month) are assessed on the 26th for unpaid invoices from the previous month. Invoices are given to your personnel at time of purchase or return of equipment. A second copy is also mailed to the customer's office. **RENTAL PAYMENTS SHOULD BE FROM "FINAL" CONTRACT AND NOT FROM "OPEN CONTRACTS" OR "RESERVATIONS"**. For customer convenience, statements are mailed on the 26th of the month. If invoices and related past due charges are not paid by the 25th following the second statement, credit may be suspended. By the signature below the applicant acknowledges and accepts these terms for this Corporation (signer must be a Corporate Officer or duly authorized person identified by an enclosed letter).

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date \_\_\_\_\_

Please print/type name of signer: \_\_\_\_\_

**NOTICE: IN THE EVENT THIS ACCOUNT BECOMES DELINQUENT, ALL WRITTEN AND VERBAL COMMUNICATIONS WILL BE AN ATTEMPT TO COLLECT THE DEBT AND ANY INFORMATION WILL BE USED FOR THAT PURPOSE.**