



6010 Maxwell Ave Phone: 812-473-1990
 Evansville, In 4771 Toll Free: 800-933-8056
www.hamlinrental.com Fax: 812-473-5007

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

Company Name:	Date business commenced:	Would you like to receive promotions and specials through email?
Officer/Contact Names:	<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, E-mail address to use:
Phone:		
Fax:		
Company address City, State ZIP Code:		

BUSINESS AND CREDIT INFORMATION

City, State ZIP Code:	Bank name:
How long at current address?	Primary business address City, State ZIP Code:
Phone:	Phone:
Fax:	Account number:
E-mail:	Type of account: <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other

BUSINESS/TRADE REFERENCES

Company name:	Phone:
Address:	Fax:
City, State ZIP Code:	E-mail:
Type of account:	Other:
Company name:	Phone:
Address:	Fax:
City, State ZIP Code:	E-mail:
Type of account:	Other:
Company name:	Phone:
Address:	Fax:
City, State ZIP Code:	E-mail:
Type of account: <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other	Other:

Agreement: All invoices are to be paid 30 days from the date of the invoice. Claims arising from invoices must be made within seven working days. By submitting this application, you authorize Hamlin Equipment Rental to make inquiries into the banking and business/trade references that you have supplied.

Signature:	Signature:
Name and Title:	Name and Title:
Date:	Date: