



AMERICAN RENTAL
 620 HARDING RD
 MORTON, IL 61550
 JUDY@AMERICANRENTAL.COM

APPLICATION FOR CREDIT



AMERICAN RENTAL
 921 E WAR MEMORIAL DR.
 PEORIA HEIGHTS, IL 61616
 JUDY@AMERICANRENTAL.COM

Date: _____
 Company Name: _____ Type of Business: _____
 Address: _____
 Billing Address: _____
 Ph: _____ Email: _____
 Website: _____
 If Applicable: Resale #: _____ Tax Exempt #: _____

CORPORATION: _____ FEIN #: _____
 President: _____ Address: _____
 Secretary: _____ Address: _____
 Social Security Number of Principal Owner, if known: _____
 -- OR --
 Individual or Partners' Names & Addresses: _____
 _____ SSN: _____
 _____ SSN: _____

How long at business address? _____ How long in business? _____

Do you require: Purchase Order Number: YES NO Job Name: YES NO

Authorized names for renting: (optional)
Important! Rental will be allowed only by persons you designate if this section is completed.

Contact Name	Title	Phone	Email

Credit References:

Company	Contact	Phone	Address

Name and Address of Bank: _____
 Whom to Contact: _____ Ph: _____ Fax: _____

American Rental is authorized to obtain any information necessary for the purpose of establishing an open 30-day charge account for this applicant. If a balance is still owed after 30 days, there will be a 1.5% monthly finance charge applied (18% annual).

Signature: _____ Title: _____