

Credit Application

All Questions Must Be Answered Our terms are Net 30

Return by Email to: ar@rentalmax.com

or Fax to: 630-221-1144

RentalMax L.L.C.

Accounts Receivable Phone: (630) 221-1133 124 N. Schmale Road Carol Stream, IL 60188

Company Name:	e: Billing Contact Person:									
Shipping Address: Billing Address:										
City, State, Zip										
Telephone # (
Persons Authorized to Re	s by:	Email	O Re	gular Mail						
	hase Orders?	O Y	es (O No						
			Estimated Mo	nthly Rental \	/olume (\$):				
Nature of Business										
Business Type O Corporation O Partnership O LLC O Individual/Sole Proprietor					Previous Name					
Dun & Bradstreet # Principal Owners and/or Officers of Applicant					Date and State Organized					
	FEIN/SS#									
1. Name Home Address	SS#									
City, State, Zip Title 2. Name SS#										
Z. Name Home Address Home Telephone# ()										
City, State, Zip Title										
APPLICANT REFERENCES						ACCOUNT #			TELEPHONE #	
Bank	NAME	ADDITESS		^	GGGGNI #			TELETIONE	т	
Bank										
Credit Reference										
Credit Reference										
Credit Reference										
Other										
Have any unsatisfied judge	ements been rendered against <i>F</i>	Applicant in the last 7 years?	O Yes O No	Are any accour	nts past di	ue?			Yes O No	
					Is Applicant a co-maker, co-signer or guarantor					
Has Applicant had equipment repossessed in the last 7 years?			O Yes O No	on any loans, contracts or leases?					Yes O No	
Is Applicant a party to a la	O Yes O No	Has applicant ever had an account with us?					Yes O No			
		Note: Attach explana								
Please have your insuran	ce carrier furnish us with a ce	rtificate of insurance showin	ig your coverage li	imits. In additio	n, we ask	that we	be added as	an additional	insured.	
Liability Insurance Carrier					Agents Name					
Address					Agents Phone					
City, State, Zip					Policy Expiration Date					
per annum) or the highest for a minimum of six mon	as follows: Payment terms are rate permitted by law. Any acc ths; a new credit application mi ible for all costs of collection (i h an extension of credit.	Net 30 days from date of invount not paid in full within 60 ust be completed before Cred) days after date of litor will consider r	invoice will be einstating credit	placed on terms. To	a COD bathe the max	asis and will r imum extent	remain on a CC permitted by la	OD basis aw,	
Credit Application and may references, as well as any will assist you in your cred credit reporting agencies in	nd agree that you (Rental Max :) also communicate the information of my lessors, landlords and an dit inquiry. This Application is good not connection with the Application dige your credit terms set forth and connection with the set fort	ation contained herein to other by other past or present credi iven for the purpose of obtain on. I hereby certify under pen	ers to decide wheth itors to give any an ning credit. I hereb nalty of law that the	ner or not to extend all necessary y authorize you information on	end credit informatio to obtain this Appli	. I autho on to you one or m cation is	rize the above , your assigne ore reports re true and corr	e bank and bus ees or transfer egarding Applic rect, and that I	siness rees, which cant from	
Signature				Date						
Print Name				Title (if applica	ble)					
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