



CREDIT APPLICATION

Crown Rentals TK, Inc
620 North Indiana Ave
Crown Point, IN 46307
Phone (219) 661-8665
Fax (219) 663-4793
www.crownrentalsinc.com

Name of Applicant: _____ Date: _____

Address: _____

City/State/Zip Code: _____

Phone #: _____ Fax #: _____

TYPE OF BUSINESS

Corporation Limited Liability Co.

Date Incorporated: _____

President: _____

Secretary: _____

Federal ID #: _____

State of Incorporation: _____

Partnership Limited Partnership

Date Formed: _____

Members of Partnership:

Federal ID #: _____

Sole Proprietorship

SS# _____

Owner's Legal Name: _____

Address: _____

City/State/Zip: _____

Federal ID#: _____ Driver's License # _____

Date of Birth: _____

CONTACT INFORMATION

Owner's e-mail address _____

Accounts Payable Name _____

Accounts Payable e-mail address _____

FINANCIAL INSTITUTIONS

Name: _____ Address: _____ Phone: _____

Acct. #: _____

Name: _____ Address: _____ Phone: _____

Acct. #: _____

Names of individuals of applicant that can sign on rental contracts:

BUSINESS REFERENCES

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

It is agreed by customer(s) that the above representations are being relied upon by Crown Rentals TK, Inc. to extend credit and that if any of the representations are wrong, incorrect and/or misrepresented, then customer is in default of this credit application/agreement.

TERMS OF CREDIT BY CROWN RENTALS TK, INC.

1. Crown Rentals TK, Inc. will invoice customer monthly for all charges made by customer, applicant, or its agents. Payment is due within ten (10) days with 1 ½% interest per month thereafter.
2. Customer’s beginning credit limit is \$1,000.00 and any modification thereof is at Crown Rentals’ sole discretion.
3. That if customer defaults on the terms here, customer is liable to Crown Rentals TK, Inc. for the balance due, reasonable attorney fees and collection costs thereon.
4. Terms of the rental contract(s) are found on the back of the rental agreement but the terms are subject to modification without notice.

So agreed _____, 202_____

Customer (Company Name)

Signature

Position or Title

Printed Name of Person Signing