



Application For Credit

Fax To: 315-536-3119

Complete Legal Name of Business:			Business Type:		
			<input type="checkbox"/> Corporation		<input type="checkbox"/> Partnership
			<input type="checkbox"/> LLC		<input type="checkbox"/> Sole Proprietor
Business Street Address:		City:	State:	Zipcode:	
Mailing Address (if different from physical address):		City:	State:	Zipcode:	
Telephone: () ()	FAX: () ()	Mobile: () ()	eMail:		
Industry:			Organization State of & Year		Federal ID #:
<input type="checkbox"/> General Construction	<input type="checkbox"/> Excavation / Paving	<input type="checkbox"/> Electrical			
<input type="checkbox"/> Environmental	<input type="checkbox"/> Masonry / Concrete	<input type="checkbox"/> Plumbing			
<input type="checkbox"/> Engineering	<input type="checkbox"/> Surveyor	<input type="checkbox"/> Steel / Structural			
<input type="checkbox"/> Other: _____ SIC Code: _____			Company Website Address / URL:		

Owner(s) / Officer(s):					
Name (First, MI, Last):		Title:		Social Security No.:	
Street Address:		City:	State:	Zipcode:	
Name (First, MI, Last):		Title:		Social Security No.:	
Street Address:		City:	State:	Zipcode:	

Accounts Payable Contact:			Purchase Order Required: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Full Name:	Phone: Fax:		eMail:		

Bank Information:					
Bank Name:		Account No.:	Contact:		
		Phone: Fax:			
Street Address:		City:	State:	Zipcode:	

Bonding Information:					
Name:		Account No.:	Contact:		
		Phone:	FAX:		
Street Address:		City:	State:	Zipcode:	

Trade References:					
Business Name:		Street Address:		City:	State:
Phone:	FAX:	Account No.:	Contact Name:		
Business Name:		Street Address:		City:	State:
Phone	FAX:	Account No.:	Contact Name:		
Business Name:		Street Address:		City:	State:
Phone	FAX:	Account No.:	Contact Name:		

The undersigned customer authorizes Seneca Equipment Rental to obtain credit/consumer reports or any other credit information on the guarantor, owner, and/or president. Customer agrees to pay all charges within 30 DAYS of the date of purchase and agrees to pay finance charge(s) of 1.5% (annual rate 18%) per month on any balance due over 30 days together with reasonable collection charges including attorney fees. If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. Seneca Equipment Rental reserves the right to rescind the credit account without any prior notification. Photostat, facsimile or email copy of all Seneca Equipment Rental documents shall be treated as original documents.

Signature _____ Title _____ Date ____ / ____ / ____

Personal Guaranty – Required

I (we) personally guarantee payment of any balance due on this account and any account of any successor corporation in which guarantor(s) has an interest including finance charges, collection charges, and attorney's fees.

Signature: _____ Date: ____ / ____ / ____

Signature: _____ Date: ____ / ____ / ____

Information Page (required):

Authorized Personnel (for Seneca Equipment Orders):			
Contact:	Title:	Mobile / Phone:	eMail:
1.			
2.			
3.			
4.			
Current Company Projects:			
Jobsite Name:	Address (or intersection);	Estimated Completion Date:	
1.		___/___/___	
2.		___/___/___	
3.		___/___/___	
4.		___/___/___	
5.		___/___/___	
6.		___/___/___	
Project / Jobsite Superintendents (match to projects above):			
Contact:	Title:	Mobile / Phone:	eMail:
1.			
2.			
3.			
4.			
5.			
6.			
Other Business Information:			
Years in Business:	Equipment Needs: (check ALL that apply)	Estimated Annual Sales (\$):	
Number of Employees:	<input type="checkbox"/> Forklifts <input type="checkbox"/> Generators <input type="checkbox"/> Skidsteers	Dunn & Bradstreet (D&B) No.:	
	<input type="checkbox"/> Excavators <input type="checkbox"/> Lighting <input type="checkbox"/> Aerials/Booms		
	<input type="checkbox"/> Scissors <input type="checkbox"/> Other		
Have you filed Bankruptcy in the last ten (10) years? <input type="checkbox"/> Yes <input type="checkbox"/> No		Any lawsuits pending? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Comments _____			
Seneca Equipment Office Use ONLY:			
Seneca Equipment Salesperson:		<input type="checkbox"/> Approved <input type="checkbox"/> Declined	
Credit Limit Approved (\$):		Date: ___/___/___	

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www.senecaequipment.com

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