

**COMMERCIAL ACCOUNT CREDIT APPLICATION**

Dance Investments, LLC

Collectively referred to as, and doing business as:

Almighty Rentals

2534 Shell Road

Georgetown Texas 78628

Phone: 512-868-3788

Fax: 512-868-3788

Almighty Rentals Use only  
Employee \_\_\_\_\_  
Cust. Currently Cash \_\_\_\_\_

**Company Information**

Company Name \_\_\_\_\_ Phone \_\_\_\_\_  
Physical Street Address \_\_\_\_\_ Fax \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
How long at this address \_\_\_\_\_ Date business started \_\_\_\_\_ Type of business \_\_\_\_\_  
Billing Address (if different) \_\_\_\_\_  
Business structure (check one)  Individual  Partnership  Corporation  
If business is corporation, what type (check one)  C Corp  S Corp  LLC  Other  
FEIN # \_\_\_\_\_ State Incorporated \_\_\_\_\_ Requested Credit Limit \_\_\_\_\_

**Billing Information**

PO # Required?  Yes  No Job # or Job Name Required?  Yes  No Are you tax exempt?  Yes  No  
Do you require job site billing?  Yes  No (if yes, we'll contact you during credit processing for details)  
A/P Contact \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Is your company bonded?  Yes  No If yes: Bonding Co \_\_\_\_\_ Phone \_\_\_\_\_ Account # \_\_\_\_\_

**Company Ownership Information**

Principal Owners / Officers	Social Security #	Title	Home Address (including zip please)	Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Banking Information**

Bank Name \_\_\_\_\_ Account # \_\_\_\_\_ Contact Name \_\_\_\_\_ Phone \_\_\_\_\_  
Bank Name \_\_\_\_\_ Account # \_\_\_\_\_ Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

**Trade References (4 Minimum, please)**

Name	Address	Acct #	Phone #	Fax #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**TERMS**

The Undersigned hereby agrees that the terms of sale and rental are NET 30 DAYS from the date of the invoice. Anything that is not paid within these terms becomes past due, and a service charge of 1 1/2% per month (18% per annum) will be added on any past due portion and must be paid in full. Regarding disputed invoices, the Undersigned agrees to provide written notice to the above address of any discrepancies within 21 days of the invoice date. In the event of default of payment, the Undersigned personally agrees to pay the amount owed, plus all collection costs & fees, including court costs and attorney fees that may be incurred by Almighty Rentals. The undersigned agrees to promptly notify Northside Tool Rental of any changes to the above information, including but not limited to, name/ownership changes & changes of address. The undersigned does hereby certify that the information contained in this application is true & correct to the best of my knowledge and hereby authorizes any credit investigation needed for verification purposes in accordance with the Fair Credit Reporting Act, Public Law 9-508.

Name (Print) \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_