



APPLICATION FOR CREDIT

SELECT THE PRIMARY LOCATION WHERE YOU WILL DO BUSINESS:

- | | | | |
|-----------------------------------|--|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> LONGVIEW | <input type="checkbox"/> TYLER | <input type="checkbox"/> NACOGDOCHES | <input type="checkbox"/> WAXAHACHIE |
| <input type="checkbox"/> WACO | <input type="checkbox"/> WICHITA FALLS | <input type="checkbox"/> DALLAS | <input type="checkbox"/> BELTON |

SELECT YOUR INDUSTRY:

- | | | | |
|-------------------------------------|---|---|---|
| <input type="checkbox"/> CONCRETE | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> GEN CONTRACTOR | <input type="checkbox"/> GOV |
| <input type="checkbox"/> HOME OWNER | <input type="checkbox"/> LAWN SVC | <input type="checkbox"/> PLUMBER | <input type="checkbox"/> IND/COMMERCIAL |
| <input type="checkbox"/> RETAIL | <input type="checkbox"/> SUB CONTRACTOR | <input type="checkbox"/> SERVICE | <input type="checkbox"/> OIL/ENERGY |

Business Name _____ ☐ Corporation ☐ Individual ☐ Partnership
Mailing Address _____ City _____ State _____ Zip _____
Physical Address _____ City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____
If Corporation, Date and State _____ Accounts Payable Email: _____
Tax ID# _____ Phone to confirm order: (____) ____ - ____ Require PO# _____ Require Job# _____
(NOTE: PO #, Job #, or location required to rent on account)

List Authorized Employees (Name, DL #, Exp Date, & State) who are Approved to Sign Rental Contract: _____

Name of Commercial/Industrial References: Current Active Suppliers

Name _____	City/State _____	Telephone _____
Name _____	City/State _____	Telephone _____
Name _____	City/State _____	Telephone _____

Bank Reference: Checking Acct # _____ Loan # _____

Bank Name _____ Address _____
Officer _____ Phone _____ Number of Years _____

Owners and/or Officers:

Name _____	Title _____	Social Sec No _____
Home Address _____	City _____	State _____ Zip _____
Home Phone _____	Email Address _____	
Name _____	Title _____	Social Sec No _____
Home Address _____	City _____	State _____ Zip _____
Home Phone _____	Email Address _____	

In Consideration of the extension of credit by Pro Star Rental to the above named purchaser, you agree that:

- Terms are net 10th of the month following purchase. Invoices are due and payable to Pro Star Rental, at the location where the acct was opened
- Accounts not paid in full by the 10th of the month following purchase are subject to a service charge on all past due amounts.
- The service charge on past due accounts will be 1.5% per month (18% annual) or the maximum allowable by law (whichever is less).
- Should this account, because of default, be collected by or through an attorney at law, the above purchaser agrees to pay 15% attorney's fees in addition to principal indebtedness and unpaid service charges.

As part of the consideration of the extension of credit by Pro Star Rental, LLC ("Pro Star") that Pro Star may make use of credit information services to gather information in regard to its credit decision. If a service is used the request may be a hard inquiry and will appear on my credit report.

Signature _____	Printed Name/Title _____	Date _____
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All fields must be completed for consideration of credit. Return completed form with W-9 to creditapp@prostarrental.com