## AABERG'S TOOL & EQUIPMENT RENTAL AND SALES, INC 253-272-1138 FAX 253-272-0869

Accounting@aabergsequipment.com

## CREDIT APPLICATION/CREDIT AGREEMENT

Full legal Business Name:					
Address		City:	State	Zip	
Phone: ()	Fax: ()				
Type of Business: [] Corporation	[ ] LLC [ ] Partnership [ ] Sole Pro	p.			
Taxable?: YES / NO Resale	Resale/UBI#:(Please		e provide Resale Certificate)		
Description of Business:	Year established	l: Fee	d. Tax ID #:		
Contact Name:	Email:				
A/P Contact:	Email:_				
(Please complete the following informationsheet.)  Name Home Address		Name			
City/State		City/State			
Cell Phone Number ()		Cell Phone Number (_	)		
TitleSocial Security #		TitleSocial Security #			
BANKING INFORMATION					
Bank Name	Branch	Acct	t:#		
TRADE REFERENCES: (Give	e only names of those you buy	from on open acco	ount)		
Name:		<u>.</u>	•		
Address:			FAX:		
Name:	Acct #:		Phone:		
Address:			FAX:		
Name:	Acct #:		Phone:		
Address:			FAX:		

The undersigned warrants that all information provided herein is correct, that he or she has read, accepted and agrees to be bound by all of the terms and conditions of this agreement and the terms and conditions of Creditor's standard form Rental Contract. The undersigned promises to pay the account in full within 30 days of invoice date. In the event the account is not paid when due, interest shall accrue on the unpaid balance at the rate of 18 percent per annum or the maximum legal rate, whichever is less. The undersigned agrees to pay collection and attorney's fees and costs. In the event that legal action is required, jurisdiction and venue shall be in Pierce County, Washington. It is understood and agreed that the undersigned specifically consents to Creditor's investigating the applicant's and its owners/principals' credit history and may utilize credit reporting services, trade reports, trade references and bank references for the purpose of determining whether to extend or continue the extension of credit to applicant. Creditor may revoke the extension of credit at any time for any reason.

any time for any reason.	
Authorized Signature X	Title
Print Name:	Date
of the persons whose signatures appear below	NTEE dit and other good and valuable consideration, receipt of which is hereby acknowledged, each ersonally, unconditionally, jointly and severally guarantee(s) and promise(s) to pay any and all or hereafter may become due to the Creditor under the terms of this Credit Application.
dishonor, non-payment or other default and, fi	incipal(s) and not as a surety and waive all notice of demand, protest, presentment or notice of rther, the undersigned agree to remain bound by this Personal Guarantee notwithstanding any lebtedness hereby guaranteed or any part thereof.
the evaluation of the credit history of the Cus	owner of the Customer, recognizing that his or her individual credit history may be a factor in omer and whether to extend or continue to extend credit to Customer, hereby consent to and in the undersigned by the Creditor, from time to time as may be needed in the credit evaluation
as if such amount constituted the direct and contribution, reimbursement or other remedy a	t of the indebtedness due, the undersigned will pay the amount due and unpaid in like manner primary obligation of the undersigned. The undersigned waive all rights of subrogation, tainst the Customer until Customer shall have made full payment of all liabilities to Creditor. Orce any of the terms of this Personal Guarantee, then the prevailing party shall be entitled to
writing sent by certified mail return receipt requ	y all credit terms of this credit application. This guarantee shall continue in force until notice in sted has been received by Creditor. This notice shall be effective 7 days after receipt of the same ransactions prior to the effective date of the termination.
Signature X	Signature X
Print Name	Print Name:

Date:

Date:



Thank you for taking the time to fill out our credit application. In addition to the questions above please fill out the following answers and return them with the application

•	Do you require PO or job numbers?
•	Do you have a list of employees allowed to purchase?
•	Do you have an email address for receiving invoices and statement?
	Please send a certificate of insurance listing Aaberg's Tool and Equipment Rental and Sales inc 1424 Puyallup

Ave Tacoma Wa 98421 to <a href="mailto:Accounting@aabergsequipment.com">Accounting@aabergsequipment.com</a> to insure no damage waiver chargers.