

Harvey's Rent-All Credit Application

APPLICATION FOR OPEN ACCOUNT FOR HARVEY'S RENT-ALL Please print legibly

Company Name: _____

Address: _____

City, State, Zip: _____

Phone: () _____ FAX () _____

E-Mail: _____ EIN# _____

Owner's Name: _____

Address: _____

City, State, Zip: _____

Phone: () _____ S.S.#: _____

Bank: _____

Address: _____

AccountNumber: _____ Type of Account : _____

CREDIT REFERENCES

Name: _____ Name: _____

Address: _____ Address: _____

City, State, Zip: _____ City, State, Zip: _____

Phone: () _____ Phone: () _____

Account Number: _____ Account Number: _____

Fax: () _____ Fax: () _____

Is a purchase order required? Yes ___ No ___

Is a job name or number required? Yes ___ No ___

Are you tax exempt? Yes ___ No ___ If yes we need to have an up to date signed tax exempt form on file.

APPLICATION FOR OPEN ACCOUNT CONTINUATION

Please print legibly

Are only certain persons authorized to charge to your account? If so, list them below.

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Preferred Statement Method: Standard Mail _____ FAX _____ E-Mail _____

Fax or E-Mail: _____

Terms: Our terms are net 30 days from the date of invoice. Balances over 30 days are subject to finance charges of 1.5% per month (18% annual rate). Any account 90 days past due will be cut off and no further rentals or sales will be permitted until the account is brought current. If paying with a credit card, payment must be made at the return of the rental. There will be a 2.5% charge if using a credit card on your statement. There will be a 10% damage waver put on every rental contract. If your insurance pays this then we need to have an updated copy of your insurance to take damage waver off. If you are tax exempt we need to have a signed tax exempt form to take taxes off. If an account is turned over to a collection service all fees will be pasted onto you, the customer and your open account will be terminated. I hereby agree to the terms and policies of Harvey's Rent-All and agree to abide by them. The above information is true and accurate to the best of my knowledge, and I hereby authorize the release of my credit history and information by the above-mentioned creditors to Harvey's Rent-All. Updated credit information may be requested at any time to maintain the account.

Signature: _____ Please Print Name: _____

Date: _____

Please return application form to:
Harvey's Rent-All
1409 S. George St.
York, PA 17403
Telephone (717) 845-2789 FAX (717) 852-0014

For office use only
APPROVED BY: _____ DATE: _____ CREDIT LIMIT _____