CROWN RENTALS, INC.

(219) 661-8665

620 N. Indiana Ave.

(219) 663-0164 Crown P

Crown Point, IN 46307 Fax (219) 663-4793

CREDIT APPLICATION/AGREEMENT

Date:	
Name of Applicant:	
Address:	
City/Chata/7in Code	
Phone:	Fax #:
ТҮРІ	E OF BUSINESS
Corporation Limited Liability Co.	Date Incorporated:
President:	Secretary:
Federal ID #:	State of Incorporation:
Partnership Limited Partnership Members of Partnership:	Date Formed: Federal ID#
Sole Proprietorship	SS#
Owner's Legal Name:	
Address:	
City/State/Zip:	
Federal ID#:	Driver's License #
Date of Birth:	

CONTACT INFORATION

Owner's e-mail address (if ar	ny)			
Accounts Payable e-mail add	ress (if any)			
	Fax		E-mail	
	FINANCIAL I	NSTITUTIONS		
Name	Address		Phone #	
Acct. #:				
Acct. #: Names of individuals of applie	_			
It is agreed by customer(s Rentals, Inc. to extend cre and/or misrepresented, ther	dit and that if any	presentations are beir of the_representatio	ns are wrong, incorrect	
TERMS 1. Crown Rentals, Inc. will		CROWN RENTA	,	
applicant, or its agents. F thereafter.	Payment is due within	ten (10) days with 1 1	/2% interest per month	
Customer's beginning cre Rentals sole discretion.	edit limit is \$1,000.00	and any modification	thereof is at Crown	
3. That if customer defaults balance due, reasonable 4. Terms of the rental contra	attorney fees and co	llection costs thereon.	,	
are subject to modification	n without notice.			
So agreed		, 2017		
Customer (Company	Name)		Signature	
Position or Title		Printed N	ame of Person Signing	