

2019

RENO FORKLIFT/STORAGE SYSTEMS/ RENO SCALES

171 CONEY ISLAND DR/P.O. BOX 50009

SPARKS, NV 89435

PHONE 775-329-1384/ FAX 775-329-7507

APPLICATION FOR OPEN CREDIT ACCOUNT

Name of Company _____ Year Started _____

Ship to Address: _____ City _____ State _____ Zip _____

Billing Address _____ City _____ State _____ Zip _____

ACCOUNTING E-MAIL _____

Telephone # (____) _____ Fax # (____) _____

Proprietorship _____ Partnership _____ Corporation _____ State of _____

Federal TIN _____ Nev. Resale # _____

ATTACH SIGNED COPY IF APPLIES

Dun & Bradstreet # _____ Do you use purchase orders? _____

BANK AND OPEN ACCOUNT TRADE INFORMATION

BANK NAME: _____ Account # _____ Checking/savings

Firm Name _____ Phone # (____) _____ Fax# _____

Address _____ City _____ State _____ Zip _____

Firm Name _____ Phone# (____) _____ Fax# _____

Address _____ City _____ State _____ Zip _____

Firm Name _____ Phone# (____) _____ Fax# _____

Address _____ City _____ State _____ Zip _____

To induce Reno Forklift/Storage Systems to extend credit to Purchaser, the undersigned hereby represents, certifies and agrees that he/she is authorized to make this application; The statements above are true; invoices will be paid within terms (**Net 30 days** unless otherwise agreed); in case of delinquency whether or not legal action is brought, purchaser will pay reasonable collection costs including attorney's fees; any delinquent amount will bear interest at the rate of **1/5% per month** (18% APR); all references given above are authorized to disclose full information as to purchasers financial condition and related matters; absence of written orders or receipts will not violate purchaser's fair obligation to pay.

Signature _____ Date _____

Name (Print/Type) _____ Title _____