

CINCY TOOL RENTAL, INC.
CUSTOMER INFORMATION & CREDIT APPLICATION
PLEASE TYPE OR PRINT

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ FAX#: _____
Proprietorship _____ Partnership _____ Corporation _____
Owner's Name _____ Address _____
Nature of Business _____ Year established _____
Federal ID # _____ - _____ Tax Exemption # _____ - _____
Email: _____
Purchase Order Required _____ YES _____ NO _____
(Please attach tax exempt certificate)

List Persons Authorized to Sign: _____

REFERENCES:

Bank: _____ Contact: _____
Address: _____ Phone #: _____
City: _____ State: _____ Zip: _____

LIST THREE CREDIT REFERENCES: (Please include Fax # or email address)

1- Name: _____ Contact: _____
Phone # _____ Email: _____
2- Name: _____ Contact: _____
Phone # _____ Email: _____
3- Name: _____ Contact: _____
Phone # _____ Email: _____

TERMS: NET 30 DAYS

You are authorized to check our history and to ask about our credit experience with the references provided. Customer agrees to be responsible for all reasonable collection, repossession, attorney's and court costs incurred in collection.

Date: _____ Signed by: _____ Position: _____

*Please attach a certificate of insurance to facilitate your credit application. Thank you.

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