



Application For Credit

Fax To: 216-328-9066
Phone : 216-642-5800

Complete Legal Name Of Business:	Business Type:
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		<input type="checkbox"/> Corporation <input type="checkbox"/> LLC		<input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor			
Business Street Address:		City:		State:		Zip:	
Mailing Address (If different from physical Address)		City:		State:		Zip:	
Telephone: ()		Fax: ()		Mobile: ()		eMail:	
Industry: <input type="checkbox"/> General Construction <input type="checkbox"/> Environmental <input type="checkbox"/> Excavating <input type="checkbox"/> Concrete <input type="checkbox"/> Masonry		<input type="checkbox"/> Plumbing / Waterproofing <input type="checkbox"/> Rental / Supply Yard <input type="checkbox"/> Landscaping <input type="checkbox"/> Government <input type="checkbox"/> Other _____		Organization State of & Year:			
				Federal ID#:		Tax Exempt # (send form)	

Owner(s) Officer(s):

Name (First, MI, Last)		Title:		Social Security No:			
Business Street Address:		City:		State:		Zip:	
Name (First, MI, Last)		Title:		Social Security No:			
Business Street Address:		City:		State:		Zip:	

Accounts Payable Contact:	Purchase Order Required <input type="checkbox"/> Yes <input type="checkbox"/> No
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Full Name:	Phone:	Fax:	eMail: (mandatory)
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Bank Information:

Bank Name:		Account No:		Contact:			
		Phone:		Fax:			
Street Address:		City:		State:		Zip:	

Trade References:

Business Name:		Street Address:		City:		State:		
Phone:		Fax: (PLEASE FILL IN)		Account No:		Contact Name:		
Business Name:		Street Address:		City:		State:		
Phone:		Fax: (PLEASE FILL IN)		Account No:		Contact Name:		

The undersigned customer authorizes Indy Equipment & Supply LLC to obtain credit/consumer reports or any other credit information on the guarantor, owner, or president. Customer agrees to pay all charges **30 DAYS** of the date of purchase and agrees to pay finance charge(s) of 1.5% (annual rate 18%) per month on any balance due over 30 days together with reasonable collection charges including attorney fees. If your application for business credit is denied you have the right to a written statement of the specific reasons for denial. Indy Equipment & Supply LLC. Reserves the right to rescind the credit account without any prior notification. Photostat, facsimile, or email copy of all Indy Equipment & Supply LLC Documents shall be treated as original documents

Signature: _____ Title: _____ Date: ____/____/____

Personal Guaranty – Required

I (we) personally guarantee payment of any balance due on this account and any account of any successor corporation
In which guarantor(s) has an interest including finance charges, collections charges and attorney's fees.

Signature _____ Date ____/____/____

Signature _____ Date ____/____/____



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Business Information – Required

Authorized Personnel For Indy Equipment & Supply Orders:

Contact:	Title:	Mobile/ Phone:	eMail:
1.			
2.			
3.			
4.			
5.			

Other Business Information

Years in Business:	Equipment Needs: (Check all that apply) <input type="checkbox"/> Skid Steer <input type="checkbox"/> Mini Excavator <input type="checkbox"/> Power Buggy <input type="checkbox"/> Wheel Loader	Estimated Annual Sales
Number of Employees:		Dunn & Bradstreet (D&B) #

Have you filled bankruptcy in the last ten (10) years? <input type="checkbox"/> Yes <input type="checkbox"/> No	Any Law Suits Pending? <input type="checkbox"/> Yes <input type="checkbox"/> No
Comments _____	

Indy Equipment & Supply Office Use ONLY:

Indy Equipment & Supply LLC Sales Person:	<input type="checkbox"/> Approved <input type="checkbox"/> Declined
Credit Limit Approved:	Date _____ / _____ / _____

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www.indyequipment.com

Independence | 6500 E Schaaf Rd Independence OH, 44131|T. 216-446-3200 F. 216-573-7712
Avon | 35350 Chester Rd Avon OH , 44011| T. 440-832-7133
North Royalton | 11159 Royalton Rd North Royalton OH 44133| T. 440-237-9040