



**GENERAL RENTAL CENTER
OF ST. CLOUD, INC**

APPLICATION FOR CREDIT

2620 First Street North
St. Cloud, MN 56303
Phone (320) 251-6320
Fax (320)252-6375
grc@generalrentalstcloud.com

Name of Firm _____ Date of Application ____ / ____ / ____

Address _____ Telephone _____

_____ FAX # _____

Mailing Address if _____ E-mail Address _____

different from above _____

If Corporation, complete the following

President Vice President Treasurer

Office Manager Accounts Payable Department

If Partnership, list names of partners

If Proprietorship, name of owner _____

REFERENCES

SUPPLIER NAME ADDRESS PHONE # ACCOUNT # IF NEEDED

1. _____

2. _____

3. _____

List names of employees able to charge to this account _____

Purchas Order required on contracts/invoices? Yes No

AGREEMENT: For consideration of the extension of credit the firm named herein, I/we promise to pay to the order of GENERAL RENTAL CENTER INC, 2620 1st St. N., St. Cloud, Minnesota all charges to the account of the firm shown herein according to the stated invoice terms at the time of shipment. In the event said account becomes past due ten(10) days or more, I/we agree that service charges shall be added at the rate of one and one-half percent(1 1/2%, 18% APR) per month from due date until date of payment.

I/we further agree that if payment of said account is not made on or before the due date(s), and the account is placed in the hands of attorney for collection or suit is brought on the same, or same is collected through or bankruptcy proceedings an additional reasonable amount shall be added to the same as attorney fees.

Date ____ / ____ / ____ Signature _____

Approved Disapproved Date ____ / ____ / ____ By _____