



APPLICATION C.O.D ACCOUNT

Applicant Business Name _____

How did you hear about Equipment Depot? _____

Billing Address _____

City _____ State _____ Zip _____

Shipping Address (if different) _____

City _____ State _____ Zip _____

Telephone _____

Fax _____

Accounts Payable's contact _____

Email _____

Telephone/ext. _____

Are Purchase Orders required? Yes / No (circle one)

<input type="checkbox"/> Taxable	<input type="checkbox"/> Non-Taxable
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Exemption or Resale Certificate – form submission required to sales representative prior to placing an order

Equipment Depot Contact/Sales Rep Name _____ Location _____

Invoices are payable by due date. Equipment Depot complies with all state Mechanic's Lien Laws. If any indebtedness incurred pursuant to this request for credit is not paid in full when due, the undersigned agrees to pay all costs of collection, including reasonable attorneys' fees, whether or not a lawsuit is brought to satisfy the debt owed to Equipment Depot by applicant and/or guarantors. Any balance so remaining unpaid shall bear interest at the lesser rate of 1.5% per month or the maximum rate permitted by law, until paid in full. Signing this agreement indicates your acceptance of the terms and conditions stated herein. In addition, you authorize Equipment Depot to make any and all inquiries necessary to process this Credit Application, including investigating the income, liabilities, credit and financial responsibility, both as individuals and as a business organization. I (we) hereby consent to the release and disclosure to Equipment Depot of the above information sought by those inquiries. Signing this agreement also indicates your understanding that all payments due under this agreement shall be remitted to Equipment Depot's principal office located in McLennan County, Texas, that you submit to the jurisdiction of the Texas courts, and your agreement that should any dispute arise as to the provisions or performances of this agreement, exclusive jurisdiction and venue shall lie in the courts of McLennan County, Texas.

Applicant's Signature _____

Date _____

Applicant's Name _____

Title _____

FOR EQUIPMENT DEPOT USE ONLY				
Date _____	Branch Code _____	Territory Code _____	Salesperson Code _____	Acct.# _____
Approved By _____	SIC Code _____	CON/IND _____		