



APPLICATION FOR ACCOUNT

3603 Seneca Ave. #3, Los Angeles, CA 90039 / (323) 903-2752 / rent@cslarentals.com

APPLICANT INFORMATION	Applicant is: <input type="checkbox"/> an individual <input type="checkbox"/> a partnership <input type="checkbox"/> a corporation <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> non-profit corp. <input type="checkbox"/> government agency		
	Company / Individual Name	Telephone	Email Address
	Mailing Address	Billing Address	Website
			Federal Tax ID No.
	City / State / Zip	City / State / Zip	State of Incorporation
	Name and Address of Parent Company (if a Subsidiary)		
	Description of Business and Services Rendered		

GENERAL	Individual / Partner / Corporate Office Name	Title	Telephone
	Home Address		
	City / State / Zip		

FINANCIAL	Bank Name	Account Number	Telephone
	Branch (Address / City / Zip)		

TRADE REFERENCES	Company Name	Telephone	Contact Name
	Address / City / State / Zip		
	Company Name	Telephone	Contact Name
	Address / City / State / Zip		
	Company Name	Telephone	Contact Name
	Address / City / State / Zip		

MISC.	Are purchase orders required? <input type="checkbox"/> No <input type="checkbox"/> Yes, Verbal Ok <input type="checkbox"/> Yes, Hard Copy Required		
	Authorized Buyer(s)		
	Insurance Company/Agent Name	Telephone	
	City / State		

ACCEPTANCE OF TERMS: I/We Agree to abide by the terms and conditions provided with this application, as well as the Equipment Rental Contract. All Invoices on account must be paid within the assigned terms to receive any discount or package price, unless revised terms are granted in writing. The undersigned agrees to personally guarantee payment of all charges made under this agreement, plus attorney fees, court costs, collection costs and/or collection company fees and/or discounts. Authorization is hereby given to obtain pertinent credit information.

Authorized Signature

Name and Title (please print)

Date