



13265 25th Ave. NW
PO Box 129
Rice, MN 56367

CREDIT APPLICATION

Phone: 320.393.4510
Fax: 320.393.2711

CREDIT LINE REQUEST \$ _____
(Payable in full within 20 days of the billing cycle)

PRIMARY APPLICANT INFORMATION – Full legal name and address of Business – Corporation, Partnership, Trust, Sole Proprietorship or Municipality

Business Name _____ (“Applicant”) Federal Tax ID Number _____
 Physical Address _____ City _____ County _____ ST _____ Zip _____
 Mailing Address _____ City _____ ST _____ Zip _____
 Business Phone _____ Fax _____ E-mail address _____
 State in which business is Registered or Incorporated _____ Date Incorporated or Established _____
 Type of Business: (Please check one)
 Individual S Corp C Corp LLC/LLP Municipality Trust Other _____

CO-APPLICANT INFORMATION (must sign below as Co-Applicant)

Name _____ Title _____ DOB _____ Social Security # _____
First MI Last
 Ownership _____ % Address _____ City _____ County _____ ST _____ Zip _____
 Home Phone _____ Mobile Phone _____ Are you a U.S. Citizen? Yes No

CO-APPLICANT INFORMATION (must sign below as Co-Applicant)

Name _____ Title _____ DOB _____ Social Security # _____
First MI Last
 Ownership _____ % Address _____ City _____ County _____ ST _____ Zip _____
 Home Phone _____ Mobile Phone _____ Are you a U.S. Citizen? Yes No

FINANCIAL INFORMATION AND REFERENCES

Annual Gross Sales \$ _____ Total Assets \$ _____ Total Liabilities \$ _____
 Bonding Company _____ Contact _____ Phone No. _____
 Trade References:
 1. _____ Phone No. _____
 2. _____ Phone No. _____
 Bank Reference _____ Loan Officer _____ Phone No. _____
 Account Type _____ Account No. _____ Account Type _____ Account No. _____
 Bank Reference _____ Loan Officer _____ Phone No. _____
 Equipment Finance Co. _____ Account No. _____ Phone No. _____
 Ever filed for Bankruptcy? YES NO Has a judgment, lien, or collections action been filed against you? YES NO

AUTHORIZATION TO RELEASE INFORMATION AND AGREEMENTS TO TERMS AND CONDITIONS

I/We have applied for credit from All Rental, Inc. and or its assignees and agree and understand that this Credit Application, and any financial documents submitted in support of this Application, may be submitted to other creditors who may then rely on the application and financial documents for extending credit to me/us. As part of the application process, All Rental, Inc. may verify information contained in my/our Credit Application and in other documents required in connection with this credit. I/We authorize you to provide All Rental, Inc. with such information including, but is not limited to, a credit report, credit score, account balances and credit histories provided by such third parties as depository institutions, trade references and credit reporting agencies. This information will be used exclusively by All Rental, Inc. for the purpose of determining credit eligibility and will not be otherwise disclosed except as required or permitted by law. I/We are not required to provide this information, but if I/we do not, this Credit Application for credit may be delayed or rejected. A COPY OF THIS AUTHORIZATION MAY BE ACCEPTED AS AN ORIGINAL. I/WE HAVE READ AND AGREED TO ALL THE TERMS AND CONDITIONS.

PRIMARY APPLICANT

By _____ Title _____ Date _____
 Authorized Signature of Applicant Printed Name of Signor

CO-APPLICANT

By _____ Date _____
 Authorized Signature of Co-Applicant Printed Name of Signor

By _____ Date _____
 Authorized Signature of Co-Applicant Printed Name of Signor