

## Leasing / Rental Account Application INDIANA - OHIO

		Rent	al 🗌	Lease
Name/Address				
Last:	First:	Mid	ddle Initial:	Title
Name of Business:				Tax I.D.or Social Security Number
Business Address:		City:	State:	Zip:
Business Phone:		Cell Phone:		Fax:
Email:				

## **Company Information**

Legal Form Under Which Business Operates:						
	Corporation	Partnership	🗌 So	le Proprietorship	Other	
DOT #						
If Division/Subsidiary	v. Name of Parent Co	mpany:	-	In Business	s Since:	
	,,	,pally!				
Parent Company Ad	dress: Principal	Responsible for Busi	ness Trans	actions:	Title:	
Address:	City:		State:	ZIP:	Phone:	

## **General Information**

Tax Exempt:	Have you had credit with us before?	Location applying for credit:
🗌 Yes 🗌 No	🗌 Yes 🗌 No	🗌 Muncie 🔲 Toledo 🗌 Indy
Purchase order required?	Has your business ever filed bankruptcy? Please list year and chapter.	Do you have any pending lawsuits?
🗌 Yes 🗌 No	🗌 Yes 🗌 No	🗌 Yes 🗌 No

## Business Credit References (No Financial Institutions) (Email or Fax # Required)

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Phone:	Phone:	Phone:
Email:	Email:	Email:
Fax:	Fax:	Fax:
Account Number:	Account Number:	Account Number:

I (we) Hereby agree to the following:

w	c) hereby	agree to the following.
	1.	That I (we) represent that this account is for business purposes only. Rentals and leases made on this account are solely made for commercial, industrial, or other business purposes. This account will not be used for personal, family, household, or other consumer purposes. Lessee represents and warrants that Lessee is not a "consumer" as defined by the Federal Consumer Credit Protection Act, and other consumer credit laws (Federal, State, Local), and waives rights granted to consumers under such laws. Lessee is solely responsible for insuring this account is used for business purposes only.
	2.	That I (we) agree to retain insurance as required naming General Truck Leasing, LLC additional insured and loss payee.
	3.	That General Truck Leasing, LLC. may contact any person named above or credit agencies for verification of fact and payment of funds on individuals or businesses referenced above.
	4.	All invoices are past due (10) days after invoice date.
	5.	The terms and conditions as presented on rental and lease contracts when signed.
	6.	That I (we) understand that this application may be revoked or rejected at any time if the facts are found to differ.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the trade references listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. Furthermore, I (we) understand we are responsible for any legal or collection fees associated in the collection of our account.

Signature

Title Return completed application and State Sales Tax Exempt Form to Fax 765-289-5441 or <u>leasing·muncie@generaltrucksales·com</u> Date