



732 East Athabaska Street, Kamloops BC, V2H 1C9
Phone: (250) 374-3515 Fax: (250) 828-1022

CREDIT APPLICATION FOR BUSINESS ACCOUNT

PLEASE RETURN BY EMAIL TO: amanda@warnerrentals.bc.ca
OR BY FAX: (250) 828-1022

BUSINESS CONTACT INFORMATION

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ PROV: _____ POSTAL CODE: _____
PHONE: _____ FAX: _____ EMAIL: _____
DATE BUSINESS COMMENCED: _____ A/P CONTACT: _____
SOLE PROPRIETORSHIP: PARTNERSHIP: CORPORATION: OTHER:
(PLEASE CIRCLE PREFERENCE)
PURCHASE ORDER REQUIRED: **YES / NO** JOBSITE REQUIRED: **YES / NO**
STATEMENT PREFERENCE: **EMAIL / MAIL** INVOICE PREFERENCE: **EMAIL / MAIL**

BUSINESS INFORMATION

PRINCIPLE NAME: _____ ADDRESS: _____ TITLE: _____
PRINCIPLE NAME: _____ ADDRESS: _____ TITLE: _____
BANK NAME: _____ CONTACT: _____
BANK ADDRESS: _____ PHONE: _____
CITY: _____ PROV: _____ POSTAL CODE: _____

BUSINESS / TRADE REFERENCES

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ PROV: _____ POSTAL CODE: _____
PHONE: _____ FAX: _____ EMAIL: _____

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AGREEMENT TO TERMS OF CREDIT

1. Each invoice is due and payable within 30 days of the invoice date.
2. If equipment is rented for more than 4 continuous weeks, periodic invoices will be issued for rental charges due. All such invoices are due and payable within 30 days from the invoice date.
3. Any account with a delinquent balance may be placed on a cash basis and the equipment will be picked up without notice at the discretion of Warner Rentals.
4. Monthly, a service charge of 2%, 24% per annum, will be added to each delinquent account. The undersigned warrants that all information on this credit application is true and correct, has read and hereby accepts all of the open account credit terms and conditions, and shall be bound by all terms and conditions as set forth in each and every rental contract. The undersigned authorizes the release of their credit standing to Warner Rentals for the purpose of establishing the same.

AUTHORIZED SIGNATURE: _____ TITLE: _____

PRINT NAME: _____ DATE: _____

AUTHORIZED SIGNATURE: _____ TITLE: _____

PRINT NAME: _____ DATE: _____

