

APPLICATION FOR CREDIT

5702 Bissonnet Houston, Texas 77081 713-667-5651 713-667-5656 (fax) 11610 Hwy 6 South Sugar Land, Texas 77498 281-568-2460 281-568-1552 (fax)

COMPANY INFORMATION: (all blanks must be filled in)							
Company Name:				Tax ID:			
Mailing Address:Street or Box				City Ctato 7in			
Shipping Address:	Street of Box			City		State 	Zip
Phone:	Fax: Em		ail:		Year Started		
Type of Business:				Individual Partnership Corporation LLC			
Dringingly	Name		Phone #		Email		
Principal: Principal:							
Purchasing:							
Payables:							
TRADE REFEREN	CES: (must b	e suppliers)	1				
COMPANY N		PHONE	Ξ#	FAX#		EMA:	(L
PERSONS AUTHO	RIZED TO	CHARGE ON A	ACCOUN'	Γ:			
Name				Phone #			
Purchase Order# Required? Yes No Damage Waiver on Account? Yes No Damage Waiver on Account?							
TERMS: NET 30							
Invoices to be paid NET 30 from invoice date. A finance charge of 18% (1.5% monthly) will be assessed on all overdue invoices. If payment has not been received within 45 days or account is over credit limit your account will be placed on hold. If account is not within terms in 60 days your credit account will be closed. Payment on account by credit card is subject to a 3% processing fee.							
Please fax completed application to 713-667-5656 or email to credit@aztecrentalcenters.com							
APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH TERMS STATED.							
Date:	_ By:						
		Signature		Printed N	lame		Title