

PLEASE COMPLETE IN FULL

EDMONTON RENT-ALL LTD.

CREDIT APPLICATION

**PLEASE FAX TO:
(780) 440 0283**

9209 34 AVENUE
EDMONTON, AB T6E 5T5
PHONE: (780) 430 6860 FAX: (780) 440 0283

(PLEASE PRINT)

LEGAL COMPANY NAME: _____

BILLING ADDRESS: _____ **PHONE:** () _____

BUSINESS ADDRESS: _____ **FAX:** () _____

(IF DIFFERENT THAN BILLING ADDRESS)

CITY: _____ **PROVINCE:** _____ **POSTAL CODE:** _____

P.O. Required? Yes No **Do You Require Monthly Statements?** Yes No **Year Commenced** _____

NATURE OF BUSINESS: _____ **MONTHLY CREDIT REQUIRED:** _____

PRINCIPALS, OWNERS OR DIRECTORS

NAME	HOME ADDRESS	POSITION
_____	_____	_____
_____	_____	_____
_____	_____	_____

TYPE OF BUSINESS: PARTNERSHIP CORPORATION SOLE PROPRIETOR

WE AUTHORIZE OUR BANK & TRADE REFERENCE TO RELEASE ALL CREDIT INFORMATION IN CONFIDENCE TO EDMONTON RENT-ALL LTD.

Signature of Authorized Officer/Owner: X _____

REFERNCE - <u>BANK</u>	
BANK: _____	BANK ACCT. #: _____
ADDRESS: _____	BANK PHONE: _____
REFERENCE - <u>TRADE</u>	
Please list at least 4 creditors, not including major credit cards.	
COMPANY NAME: _____	PHONE: _____
ADDRESS: _____	FAX: _____
COMPANY NAME: _____	PHONE: _____
ADDRESS: _____	FAX: _____
COMPANY NAME: _____	PHONE: _____
ADDRESS: _____	FAX: _____
COMPANY NAME: _____	PHONE: _____
ADDRESS: _____	FAX: _____

PLEASE COMPLETE SECOND PAGE

*****FOR PROMPT ATTENTION – PLEASE COMPLETE IN FULL**

DAMAGE WAIVER OPTION

For an additional 10% of rental charges, our Damage Waiver will cover all but 15% of damage to equipment except damage to:

1. Any equipment as a result of overloading or exceeding the rated capacity of said equipment.
2. Any equipment resulting from a failure to properly service the equipment, including reasonable maintenance requirements such as checking the oil levels and lubricating the equipment.
3. Motors, generators, drills or other electrical devices caused by inadequate or excessive electrical current.

Damage Waiver DOES NOT cover theft or mysterious disappearance.

Damage Waiver is NOT applicable to rental of Motor Vehicles.

Please sign to "ACCEPT" or "DECLINE" Damage Waiver

ACCEPT DAMAGE WAIVER: _____

DECLINE DAMAGE WAIVER: _____

***NOTE: upon declining Damage Waiver, customer assumes responsibility for all damages to equipment.

***PLEASE HAVE COMPLETED BY A PRINCIPAL, OWNER, OR DIRECTOR OF THE COMPANY.

TERMS AND CONDITIONS

(Print name of company) _____ does hereby apply to EDMONTON RENT-ALL LTD. for credit for the supply of rental equipment, services and materials in accordance with this application for credit. We will indemnify EDMONTON RENT-ALL LTD., and see EDMONTON RENT-ALL LTD. is paid for its account with respect to any order now or hereafter. We further agree to pay any invoices rendered by EDMONTON RENT-ALL LTD. with respect to any order within 30 days of the date of such invoice or invoices and that we will pay to EDMONTON RENT-ALL LTD. interest at the rate of two percent (2%) per month, being an effective annual rate of 26.82 percent (%) per annum, calculated monthly, on all overdue invoices, interest to commence on the 31st day following the date of the invoice or invoices.

We hereby affirm that the information given for the purpose of obtaining credit is true and correct; and agree that EDMONTON RENT-ALL LTD. may take such investigations of our credit standing as is deemed necessary at any time, and may exchange credit information with other credit grantors; and may issue, cancel and set a credit limit for our account or accounts.

(Date)

(Authorized Signature)

(Title)

(Print Name)

PERSONAL GUARANTEE:

The undersigned hereby unconditionally guarantee(s) the full and prompt payment to EDMONTON RENT-ALL LTD. when due all indebtedness, obligations and liabilities of customer named on previous page of this Credit Application, including all amounts now owing and arising in the future.

This guarantee shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested, is received by EDMONTON RENT-ALL LTD. This notice shall specify the date of termination, not to be less than (7) seven days after the notice is received, and shall not affect any charges for transactions with the customer that were entered into prior to the termination date.

DATE: _____ AUTHORIZED SIGNATURE: _____

WITNESS: _____ AUTHORIZED SIGNATURE: _____

OFFICE USE ONLY

Reviewed by: _____ Date: _____ Approved Declined Limit: _____

Branch Phoned, Date: _____ Name: _____

Customer Phoned, Name: _____ Date: _____ Letter Sent, Date: _____

COMMENTS: _____

: _____