

Aztec Rental Center  
2069 Apperson Drive  
Salem, Virginia 24153  
Phone: 540-989-1231 or Fax: 540-989-5140

**Credit Application**

Name of Firm or Corporation \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone No. \_\_\_\_\_ Purchase Order Required \_\_\_\_\_ Yes \_\_\_\_\_ No

Fax No. \_\_\_\_\_ Tax Exempt \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ No. \_\_\_\_\_

Our Legal entity is: \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership  
\_\_\_\_\_ Proprietorship

Principal Owner(s) or President \_\_\_\_\_

Manager or Foreman \_\_\_\_\_

Authorized Agents \_\_\_\_\_

\_\_\_\_\_

**Credit References**

<u>Telephone No.</u>	<u>Name of Company</u>	<u>Address</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____

**Banks**

<u>Telephone No.</u>	<u>Name</u>	<u>Address</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____

**Authorization To Release Information**

I hereby authorize our bank(s) to release any information necessary to assist in establishing a line of credit.

Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Authorized by \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_