



Office (Remit To)
 125 Bayshore Blvd
 San Francisco, CA 94124
 Phone: (415) 642-2090
 Fax: (415) 642-2097

Rental Department
 125 Bayshore Blvd
 San Francisco, CA 94124
 Phone: (415) 864-2811
 Fax: (415) 864-6977

Service Department
 1975 Galvez Avenue
 San Francisco, CA 94124
 Phone: (415) 824-8000
 Fax: (415) 282-8861

Credit Application

Refer By:

*** Important:** This form *MUST* be completed before we can proceed your service needs!
 Please fax us completed & signed application to (415) 642-2097

.....
 Company Name

.....
 Address

.....
 City

()

.....
 Telephone Number

.....
 State

()

.....
 Fax Number

.....
 Zip

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.....
 A/P Dept. Contact Person:

.....
 A/P Dept Phone:

*** Company Information ***

Sole Proprietor Partnership Corporation Government Date Incorporation

Please provide Name, Address, & Social Security Number of Sole Proprietor, Partners, or Corporate Officers.

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 Name

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 Title

.....
 Social Security No.

.....
 Address

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 City

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 State

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 Zip Code

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 Name

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 Title

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 Social Security No.

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 Address

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 City

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 State

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 Zip Code

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 Name

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 Title

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 Social Security No.

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 Address

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 City

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 State

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 Zip Code

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 Description of Business

.....
 Federal ID Number

.....
 Date Business Established

.....
 Contactor's License Number

*** Please list or attach with company letterhead of all authorized employees to use on this charge account. ***

- | | | |
|----------|----------|----------|
| 1) | 4) | 7) |
| 2) | 5) | 8) |
| 3) | 6) | 9) |

*** Please answer the following question. (Questions MUST be answered) ***

Estimate Monthly Equipment Rental Needs: \$

Purchase Order Required? Yes No Job Number or Name Required? Yes No

Do you wish to purchase Accident Damage Wavier on rented equipment? Yes No

Must provide a copy of your insurance certificate stated U Save Equipment Rental as Additional Insured as well as Lost Payee. Certificate must state that all rented & lease equipment is covered for physical damage.

*** Bank Information ***

.....
 Bank

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 Account#

.....
 Address

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 City

.....
 State

.....
 Zip

()

()

.....
 Contact Number

.....
 Fax Number

.....
 Contact Person

** Trade References - List Active Accounts Only (Must Provide Fax Number)*

.....
Business Name *Account#*

.....
Address *City* *State* *Zip*

.....
Contact Number *Fax Number (Must Provide)* *Contact Person*

.....
Business Name *Account#*

.....
Address *City* *State* *Zip*

.....
Contact Number *Fax Number (Must Provide)* *Contact Person*

.....
Business Name *Account#*

.....
Address *City* *State* *Zip*

.....
Contact Number *Fax Number (Must Provide)* *Contact Person*

Please read before signing

Confidential Account Agreement: For the purpose of obtaining equipment from U Save Equipment Rentals, Inc. The following statements are made knowing that U Save Equipment Rentals, Inc. is relying upon the same should credit be extended. It is further understood that all information supplied for the purpose of obtaining an open account will be verified and shall be regarded as continuous until another is substituted for it and the firm listed below agrees to inform U Save Equipment Rentals, Inc. of material change in their financial status. By affixing the signature below, the undersigned (or if a corporation, the corporate-authorized officers/agents) agree:

1. The foregoing is accurate.
2. To pay when due all invoices from U Save Equipment Rental Inc. TERMS: NET 30 DAYS
3. To pay on all delinquent invoices payment penalty as allowed by law not to exceed 2% per month.
4. To all terms listed on the standard contract, which is signed at the rental center when equipment is rented, copy enclosed.
5. That we are ultimately responsible for all invoices on jobs that we hire the services of U Save Equipment Rental, Inc. for.
6. To cooperate with U Save Equipment Rental, Inc. in providing Prelien Information when *requested*.
7. That disputes Arising out of any contract with U Save Equipment Rentals shall be settled by binding arbitration according to the rules of the American Arbitration Association.
8. THE COST OF COLLECTION FEES necessary to collect a debt resulting from this agreement may be ADDED to the amount due.
9. U Save Equipment Rentals in the event of litigation arising out of this agreement, shall be entitled to their reasonable attorney costs and expenses incurred including attorney fees.
10. The Facsimile of my SIGNATURE is intended to be used as my original as printed by the receiver.
11. I Authorize the above bank to release information concerning my account to U Save Equipment Rentals, Inc., for the purpose of obtaining credit.
12. PERSONAL GUARANTEE: I personally guarantee payment of any and all indebtedness of the above account, and agree to be bound by the above terms and conditions.
13. In consideration of extending credit, the undersigned hereby gives this Continuing Guaranty to U Save Equipment Rentals Inc. for payment in full, together with all fees and charges, and agrees to be bound by above terms and conditions. U Save Equipment Rentals Inc. agrees to notify the undersigned of the applicants' default.

APPLICATIONS MUST BE SIGNED BY OWNER, PARTNERS OR OFFICERS

.....
Authorized Signature *Date*

.....
Print Authorized Name *Title*

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Authorized Signature *Date*

.....
Print Authorized Name *Title*

.....
Authorized Signature *Date*

.....
Print Authorized Name *Title*