

## General Equipment & Supplies Inc Construction/Industrial Equipment Credit Application

Phone: 701-282-2662 Fax: 701-364-2190

Email Completed Application To: credit@genequip.com

Applicant Legal Name:				Trade Name (If Any):						Emai	il Address:	
Mailing/Billing Address:		City	State	Zip	_		ty Limits?	Busine	ss Phone:	Hom	e Phone:	
Physical Address:		City	State	Zip	County		ty Limits?	Cell Ph	Cell Phone:		Fax Number:	
Business Structure: Corporation LLC P			Partnership	) So	ole Proprietors		Yes No	Gov	vernment Agency	Year	s In Business:	
Complete if Individual	Social Security Number	US (	Citizen	Date of Bir	rth Compl		Federal T	ax ID	State of Incorpora	l ition	Date of Incorporation	
	Partners Name		Title	Address	Phor	ne Numbe	er		Date of Birth and S	h and Social Security #		
Owners,												
Partners, Principal												
Officer												
					0: :		1 1400 = 1		10.111.10	21.1		
Type of Business	Fiscal year	Fiscal year End Annual			Slack Mo			ill Equipment Be Used Outside of County or State Listed Above? If so, nere?				
Judgments or	Yes If yes, date and please explain:											
Lawsuits Pending?	No	If yes, date filed and please explain:										
Ever Filed for	Yes											
Bankruptcy?	ruptcy? No											
Ever Had	Yes	If yes, d	ate and please e	explain:								
Goods Repossessed?	No											
		I		ı	Financial Ref	erences						
Bank or Equipment Financing Company Contact Per			Contact Perso	on	Phone Numb	ne Number / Email Address		ss Address (City, State)		Account #s (Checking, Savings, Loan)		
											/	
		l		1								

				Trade R	eferences				
Company Name	(	Contact Person			umber / Email Address	Address (City, State, Zip)			
			Insura	nce & Bo	nding Information				
Insurance / Bonding Company I	Namo Incura	nce / Bondir	na Agent Nar	no l	Phone Number	<u> </u>	Email	Address	
insurance / Bonding Company i	vaine insura	Insurance / Bonding Agent Na			Filone Number	Email Address			
Accounts Payable Contact Name	Accounts Payable	nts Payable Phone #			ts Payable Email	Purchase Or	der Required:	Tax Exempt (if yes, attach valid exemption certificate):	
						Yes No		Yes No	
	Email Addres	mail Address for Invoices & Stateme			Would you like to re	ceive a Monthly State			
					Yes	☐ No			
How did you hear about us? Ex: I Customer Name, Website N		Name, Estimated Monthly Purchas			Credit Limit R	equested:	sted: Number of Machines in Eq		
Gustomer Name, Website P	variie, etc.								
Jurisdiction: Buyer agrees that the prop Cass County District Court in North Dake Parts Return Policy: Stocked parts and applies to all returned parts. All sales are	ota. cores must be retur	ned within 3	0 days of orig	ginal invoid	ce. Parts must be in origina		-	-	
The undersigned certify to General Equip and financial institutions to whom this ap and/or trade reference(s) to release such	plication is referred t	to obtain info	rmation from	any credi	t reporting agency and he	reby authorizes the a	bove-named bai	neral Equipment & Supplies, Inc nk(s), financial institution(s),	
Name:	lame:			_	Signed:		····		
Date:				_	Title:				
PERSONAL GUARANTY  n consideration of the goods and/or serv han one, then jointly and severally) pers nc. now or in the future, together with all such indebtedness to General Equipment hat may provide financing options, to ob	ices supplied by Gel sonally guarantee to ny collection costs, in t & Supplies Inc. Fur	neral Equipn General Eq nterest, and ther, the und	nent & Suppl uipment & Si attorney's fe dersigned au	ies, Inc., a upplies, In es. It is u thorizes G	at the request of the under c., the prompt payment of nderstood that this guarar General Equipment & Supp	rsigned, and in relian fall sums due and ow nty shall be a continui plies, Inc, and financia	ce on this guara ring by Buyer to ng and irrevoca al institutions to	inty, the undersigned (if more General Equipment & Supplies, ble guaranty and indemnity for who this application is referred	
executing this Guaranty, you consent t	o the jurisdiction of	Cass Coun	ity, ND for al	I enforcer	ment actions related to th	nis Guaranty.			
Name:		Signed:			Date:				
Name:		Signed:				Date:			