
Customer Credit Application

Name of Firm: _____ Federal Tax I D # _____
Mailing Address: _____ CITY _____ STATE _____ ZIP _____
Street Address: _____ CITY _____ STATE _____ ZIP _____
Phone: () _____ FAX: () _____ Years in Business _____

Principal Members of Firm

Name: Title: _____ Home Phone: _____
Home Address: _____ CITY _____ STATE _____ ZIP _____

Name: Title: _____ Home Phone: _____
Home Address: _____ CITY _____ STATE _____ ZIP _____

BANK INFORMATION

Bank Name: _____ Phone: _____ Officer : _____
Address: _____ CITY _____ STATE _____ ZIP _____

Credit References

Name: _____ Phone: _____ Fax: _____
Name: _____ Phone: _____ Fax: _____

Your Company Policies

Purchase Orders: _____ Job Name: _____ Job No. _____ Taxable: _____ Exempt _____

Damage Waiver Coverage:

Damage waiver is equipment protection - it covers 80 % of repairs or replacement of any equipment accidentally damage while in customer possession. There is a fee of 9% charged per rental invoice.

I Accept _____ Decline _____

Lafayette Rental Service, Inc.
1014 Bertrand Drive
Lafayette, La. 70506
Ph: 337-234-4763 Fax: 337-234-6498

Signed: (principal of firm) _____ Date: _____