Action Equipment & Supply LLC

Signature _

168 Reynolds Road Ft. Edward N.Y. 12828 Phone # 518-745-8565 Fax # 518-745-7565

Office Use Only: Account #:	
Approved By:	Limit:
Declined By:	Date:

Application For Credit Applicant Information: * ~PLEASE MAIL ORIGINAL BACK~*

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ame					
eet Address———			City—	State —	Zip
lailing Address (if different from above)			City	State	Zip
one ———	Fax	Cell	—— Pager ————	——— Email ———	
siness Type: 🛭 C	forporation	rship Proprietorship	Federal ID #:		
siness Trade: vner(s) and/or O	fficers:	Organization Year:	Organiza	tion State:	
st Name	Middle Initial	Last Name	Title	Social Secu	rity #
dress		City	State	Zip	
st Name	Middle Initial	Last Name	Title	Social Secu	rity #
dress		City	State	Zip	
rson Responsib It Name Ink Information:	Middle Initial	Last Name		Phone	
ık Name	Address	Phone	Account No.	Contact	
de References	– Suppliers:				
ne	Address	Phone	Fax	Contact	
ne	Address	Phone	Fax	Contact	
ne	Address	Phone	Fax	Contact	
undersigned customer auth n <u>30 DAYS</u> of the date of p in Equipment & Supply LLC	norizes Action Equipment & Supply LLC, to nurchase and agrees to pay finance charge(C. reserves the right to rescind the credit ac	obtain credit/consumer reports or any s) of 1.5% (annual rate 18%) per mo count without any prior notification.	Terms, Collection Expe y other credit information on the guaran nth on any balance due over 30 days to this signed facsimile is equal to an origi	EASE SUPPLY AUTHORIZED INSES tor, owner, and/or president. (gether with reasonable collect nal copy for legal purposes.	D LIST OF PERSONNEL" Customer agrees to pay all ch ion charges including attorney
Sig	gnature			Date:	_
	antee payment of any balance nce charges, collection charges			r corporation in which	guarantor(s) has an
Sic	inature	Title:		Date:	

Title: _

_ Date: _