

Form: GEF1289502
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Department: Accounting/Credit



Open Account Credit Application

Supersedes All Previous Communications

Telephone: 800.533.0524 • +507.451.5510

Telefax: 877.344.4375 • +507.451.5511

Legal Company Name _____
Business Operating Name _____
Bill to Address _____
City _____ State/Province _____ Zip/Postal Code _____ Country _____
Telephone _____ Telefax _____
Type of business: Corporation _____ (State) _____ Partnership _____ Proprietorship _____
Number of years in business _____ Number of years under present owner(s) or Management _____
Resale Tax Number _____ Company Website _____
Principal Stockholder(s) or Partners _____
Sales Manager _____ Email Address _____
Accounts Payable Manager _____ Email Address _____

National Trade References

PLEASE LIST FIVE (5) REFERENCES WITH TELEFAX NUMBERS.
LOCAL REFERENCES NOT ACCEPTED.

1) Name _____	Account Number _____
Telephone Number _____	Fax Number _____
2) Name _____	Account Number _____
Telephone Number _____	Fax Number _____
3) Name _____	Account Number _____
Telephone Number _____	Fax Number _____
4) Name _____	Account Number _____
Telephone Number _____	Fax Number _____
5) Name _____	Account Number _____
Telephone Number _____	Fax Number _____

INSTRUCTIONS: Complete this application by supplying the requested information. An Incomplete application will result in processing delays. Allow a minimum of ten (10) working days for processing. For faster service, submit this application via return telefax.

I hereby authorize General Equipment Company to obtain credit Information from the references submitted above.

Authorized Signature _____ Date _____

Name (Print) _____ Title _____