



Customer Info	
Business Name	
Address	
	Postal Code
E-mail	Telephone
	ercial Direct to Video Feature ecial Events TV Series Live Event
Contacts	
President	
Bank Info	
Bank Name	Account No
Address	·····
	Company, Name, Address and Phone)
1	
	
Credit Info	
Credit required	Date
Driver's License Number	
	Exp. Date

Insurance

In order to complete your credit application and account setup, insurance must be obtained by your company prior to the equipment being sent to your production. Please refer to the "Insurance for Equipment Rental" Form for details. In some cases Cash or Credit Card Deposits in the amount of the replacement price of the equipment (Should only be done at the General Manager's discretion only).

Authority

All statements made here are accurate to the best of my knowledge. I accept that this company can make any and all inquiries needed for this application. I/we indemnify NTB from liability resulting from their credit survey. The person executing this Application on behalf of the customer represents that they have the authority to bind the customer to the provisions in this form.

Signe	d Date _		
	(Must be signed by Principal, Owner or	Authorized Agent)	
Name		Date	
	(Please Print)		