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12/13/2005

CONFIDENTIAL CREDIT APPLICATION

PLEASE TYPE OR PRINT:

Company Name _____ Ph# _____ H: _____ F: _____

Billing Address _____ City _____ State _____ Zip _____

Physical Address _____ City _____ State _____ Zip _____

Partnership () Individual () Corporation () **Date Business Started** _____

Email Address: _____

Is Applicant a Branch ___ Division ___ Subsidiary ___ Or other related Organization _____

If so, explain and give name and address of Parent Corporation or Headquarters: _____

OFFICERS, PARTNERS, OR INDIVIDUAL

| Name & Title | Complete Address | SS # | % Ownership |
|--------------|------------------|-------|-------------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ |

BANK(S)

| Name | Branch & Officer | Phone No. & Address | Account Number |
|----------|------------------|---------------------|----------------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |

TRADE REFERENCES

| Name | Complete Address | Telephone Number |
|----------|------------------|------------------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |

Terms: Due upon receipt **Past Due Accounts:** Service Charge 1.5% Monthly, Equivalent Interest Rate Per Annum is 18%

CREDIT CARD

Name on card: _____

MC/VISA #: _____ **Exp. Date:** _____

Guaranty: I/ We understand and agree that this application for commercial credit may be assigned or transferred by you, and that the information may be communicated to others for a credit decision. I/ We understand that if credit is extended that I/ We will guarantee payment within the terms set out above. I/ We authorize the bank and other references, and any other past or present creditors to give all necessary information to you, your assignees or transferees. I/ We hereby certify under penalty of law that the foregoing statements are true. The undersigned agrees to pay ALL penalties, service charges, court costs and fees, including reasonable Attorney's fees that may be incurred in the collection of any and all past due amounts that may arise to the full amount allowable by law. I/ We understand that if credit is extended, I/ We will be transacting business in Virginia, and any disputes will be subject to Virginia law and jurisdiction and tried at Stafford Courthouse, Stafford County, Virginia. If payments are not received within 60 days the credit card will be charged for any money owed to Web Equipment. By signing the application below I/We agree to this use of the credit card.

Legal Name of Company _____ Fed ID # _____

Signature of Officer/Owner _____ Title _____

Printed Name of Officer/Owner _____

Please return by mail this ORIGINAL application signed by at least one of the officers, partners or individuals listed above.