

FORK LIFT EQUIPMENT CO.,INC

P.O. BOX 430 * 201 CHEVY DR * FOUNTAIN INN, SC. 29644 * (864) 862-2908 * FAX (864) 250-1170 * TOLL FREE 800-843-0512

Distributor of New -Used Forklift Parts and Equipment

APPLICATION FOR CREDIT

IMPORTANT: Must be filled out completely and legibly or this form will not be processed.

FIRM NAME _____ YEAR ESTABLISHED _____

ACTUAL LOCATION ADDRESS _____

BILLING ADDRESS _____

PHONE NUMBER _____ FAX NUMBER _____ LINE OF CREDIT DESIRED _____

FEDERAL ID NUMBER OR IF SOLE PROPRIETORSHIP, INCLUDE OWNER'S SOCIAL SECURITY NUMBER _____

() CORPORATION () PARTNERSHIP () SOLE PROPRIETORSHIP () GOVERNMENTAL AGENCY

ACCTS PAYABLE CONTACT _____

AUTHORIZED BUYERS: _____

ARE ANY OF YOUR PURCHASES EXEMPT FROM SC SALES TAX _____

IF YES, PLEASE ATTACH A SIGNED TAX EXEMPTION CERTIFICATE.

TRADE REFERENCES

NAME _____ PHONE _____

ADDRESS _____ FAX _____

CITY _____ STATE _____ ZIP _____

NAME _____ PHONE _____

ADDRESS _____ FAX _____

CITY _____ STATE _____ ZIP _____

NAME _____ PHONE _____

ADDRESS _____ FAX _____

CITY _____ STATE _____ ZIP _____

BANK REFERENCE

BANK BRANCH _____ ADDRESS _____

PERSON TO CONTACT _____

PHONE NUMBER _____

FAX NUMBER _____

PRINCIPALS (required)

NAME _____ SOC SEC _____ ADDRESS _____

NAME _____ SOC SEC _____ ADDRESS _____

NAME _____ SOC SEC _____ ADDRESS _____

PLEASE BE ADVISED OUR TERMS ARE NET ON RECEIPT. ACCOUNTS WHICH BECOME 30 DAYS PAST DUE WILL BE PUT ON C.O.D.

IF AN ACCOUNT BECOMES 60 DAYS PAST DUE, ALL SHIPMENTS WILL BE PUT ON HOLD. AT 90 DAYS PAST DUE, ACCOUNTS ARE TURNED OVER FOR COLLECTION

SIGNATURE _____ TITLE _____

DATE _____ MUST BE SIGNED BY OWNER OF BUSINESS OR OFFICER OF CORPORAT