



Application for Credit

Aide Rentals Inc.

186 West Sauk Trail
South Chicago Heights, IL 60411
708-756-4020

8600 Kennedy Avenue
Highland, IN. 46322
219-838-4300
FAX 219 838-4316

Company Name : _____

Company Address: _____

Mailing Address:(if different) _____

City, State, Zip: _____

Phone: _____ Fax: _____

Type of Business: _____

Year business started: _____ Years at present location: _____

Require purchase orders? Yes _____ No _____

Type of organization: Corporation Partnership Individual

Principle Owners: _____

Persons authorized to rent: (To be updated by customer as needed)

Banking References—include account numbers and contact.

1st Bank _____

2nd Bank _____

Credit References: —include current address, fax and phone numbers.

1st Firm: _____

2nd Firm: _____

3rd Firm: _____

Authorization to Release

Please accept this as my authorization to release any and all information concerning my credit history with your organization to : Aide Rentals Inc. _____

Please note: Customer is responsible for theft, damage, abuse and vandalism. Be sure of your insurance coverage. An insurance certificate may be requested.

In making this application for credit, the customer agrees to pay all invoices within thirty days of the date of the invoice, and to pay a service charge of 1 1/2% per month, which is an annual percentage rate of 18% on all overdue balances. In the event a suit is necessary to collect any money, the customer agrees to pay the seller's reasonable attorney fees and costs including attorneys fees for appeal.

Personal guarantee: In consideration for credit extended, the undersigned contracts and guarantees to the faithful payment, when due, of all accounts of the company seeking credit for five years from the date of this application. The undersigned guarantor expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payment and any notice of default by the company seeking credit and all other notices the guarantor may be entitled to. Revocation of the guarantee shall be in writing and delivered by certified mail.

Signature: _____ Title: _____ Date: _____