



PARTS-R-PARTS PLUS, Inc.

Rentals | Sales | Service

855 East 68th Avenue, Denver, CO 80229

OFFICE: (303) 426-0006

FAX to Corporate Office

(303) 426-4803

COMMERCIAL CREDIT APPLICATION

BUSINESS INFORMATION:

Business Name: _____ Phone: _____ Fax: _____
 Mail to Address : _____ City: _____ State: _____ Zip: _____
 Ship to Address: _____ City: _____ State: _____ Zip: _____
 Owner/Partner/Officer: _____ Title: _____
 Email Address: _____ Website URL: _____
 Contractor License Number: _____

ACCOUNTING INFORMATION:

Contact's Name: _____ Accounting Email Address: _____
 Accounting Phone: _____ Accounting Fax: _____

TAX ID/SSN: _____ Home Phone: _____

Sole Proprietor Partnership Corporation Type of Business: _____

Year Established: _____ State of Incorporation: _____ Parent Company: _____

Ever Filed Bankruptcy? _____ If Yes When? _____ Amount of Credit Desired: _____

BANK REFERENCE: _____ Account Number: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____ Fax: _____

TRADE REFERENCES:

Business Name: _____ Phone: _____ Fax: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Business Name: _____ Phone: _____ Fax: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Business Name: _____ Phone: _____ Fax: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Business Name: _____ Phone: _____ Fax: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

I understand that the above information is provided for the purpose of obtaining credit and I certify that to the best of my knowledge the above information is true and correct. By signing this form I am personally guaranteeing this debt and that I am authorized to sign on behalf of the company. By signing this form, I acknowledge and agree that balances are due within 30 days from said invoice date, and an interest rate of 1.5% per month will be charged on all unpaid balances. In the event of default and referral to an attorney and/or collection agency, I agree to pay all costs of collection, including attorney's fees.

Officer/Owner Signature: _____ Title: _____ Date: _____