

HUM'S HARDWARE & RENTAL

3901 E Broadway, N Little Rock, Arkansas 72114 Phone 501-945-2216 Fax 501-492-5989 Email ar@humsnlr.com

BUSINESS CREDIT APPLICATION

NAME OF BUSINESS

BILLING ADDRESS

CITY, STATE, ZIP

PHYSICAL ADDRESS

PHONE

FAX

A/P CONTACT

E-MAIL

CORPORATION _____ INDIVIDUAL _____ PARTNERSHIP _____ GOVERNMENTAL _____ NON-PROFIT _____

DATE OF INCORPORATION OR INCEPTION: _____

FEDERAL TAX ID OR SOCIAL SECURITY NUMBER _____

NAME & ADDRESS OF PRINCIPAL/OWNER

PRINCIPAL/OWNER NAME

PHONE

PRINCIPAL/OWNER ADDRESS

BANK NAME

CITY

BANK OFFICER NAME

PHONE

TRADE REFERENCES:

NAME

ACCOUNT #

FAX

NAME

ACCOUNT #

FAX

NAME

ACCOUNT #

FAX

SALES PERMIT NUMBER _____ **IF YOU DO NOT PAY SALES TAX**, WE MUST HAVE A SIGNED ARKANSAS EXEMPTION CERTIFICATE FORM ST391ALONG WITH A COPY OF YOUR SALES TAX PERMIT FOR OUR FILES.

DO YOU REQUIRE A PURCHASE ORDER?

OUR MONTHLY STATEMENTS ARE SENT ELECTRONICALLY- PLEASE PROVIDE EMAIL

ADDRESS FOR DELIVERY:

I CERTIFY THAT ALL OF THE ABOVE INFORMATION IS CORRECT AND FULLY UNDERSTAND AND AGREE TO ALL CREDIT TERMS. OUR TERMS ARE NET 10TH OF THE FOLLOWING MONTH.

SIGNATURE

DATE

PRINTED NAME

TITLE

DATE ACCEPTED-DENIED

INITIALS

CREDIT LIMIT

****SOME EQUIPMENT RENTALS REQUIRE A CERTIFICATE OF INSURANCE FOR LEASED/RENTED EQUIPMENT ON FILE****