

**INDEPENDENT
AERIAL
EQUIPMENT**

CREDIT APPLICATION

**765 YORK STREET
ELIZABETH, NJ 07201
Phone: 908-527-1211
Fax: 908-527-1271**

“You deserve the choice when you need a lift”

Independent Aerial Equipment: For the purpose of establishing credit with Independent Aerial Equipment the undersigned Applicant furnishes the following information. Applicant represents and warrants said information is a true and correct statement of its financial condition.

Business Applicant			A/P Contact Name			Date		
Address				Billing Address				
City		State	Zip	City		State	Zip	
Telephone No.		Fax No.		Years in Business	# of Employees	Estimated Monthly Rental Volume		
Owners (if applicant is a sole owner or partnership) Officers (if corporation)				Title		Social Security #		Home Phone
Name								
Address								
Name								
Address								
Name								
Address								
Trade References								
Name				Address				
Contact Name				Phone No.			Fax No.	
Name				Address				
Contact Name				Phone No.			Fax No.	
Name				Address				
Contact Name				Phone No.			Fax No.	
Name				Address				
Contact Name				Phone No.			Fax No.	
Banking or Savings Loan Association								
Name				Branch Address				
Account No.		Contact Name		Phone No.			Fax No.	
Name				Branch Address				
Account No.		Contact Name		Phone No.			Fax No.	

