

# THE WASHINGTON SOURCE

## APPLICATION FOR EQUIPMENT RENTAL

Firm Name: \_\_\_\_\_  
Billing Address: (No P.O. Boxes) \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
Email Address: (To Send Invoice) \_\_\_\_\_

Company Background:  
Individual  Sole Proprietorship  Partnership  Corporation  LLC

Doa or Incorporation in what City & State: \_\_\_\_\_  
Year business was established: \_\_\_\_\_  
Federal ID or Social Security Number: \_\_\_\_\_  
If subsidiary, name of parent company: \_\_\_\_\_  
Principals of the Company:  
Title: \_\_\_\_\_ Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_ S.S. Number: \_\_\_\_\_  
Home Address: (No P.O. Boxes) \_\_\_\_\_

Title: \_\_\_\_\_ Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_ S.S. Number: \_\_\_\_\_  
Home Address: (No P.O. Boxes) \_\_\_\_\_

Trade References:  
Please furnish information of three companies from whom you purchase or rent.  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Contact: \_\_\_\_\_ Acct. No. \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Contact: \_\_\_\_\_ Acct. No. \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Contact: \_\_\_\_\_ Acct. No. \_\_\_\_\_

Banking:  
Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Checking Account: \_\_\_\_\_

**Please Initial Here:** \_\_\_\_\_

Banking:

Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Checking Account: \_\_\_\_\_

Individuals Authorized to Order or Receive Equipment:

Written P.O. Required

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal Guarantee:

Must be signed by a principal of the Applicant Company if said Company is less than five years old

I, \_\_\_\_\_ residing at: \_\_\_\_\_  
\_\_\_\_\_ for and in consideration of your extending credit at my request to the above named Company, hereby personally guarantee to you full payment of any obligation of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

Authorized Signature

I certify that all the information on this form is correct. I understand that Open Account credit terms are Net 10 or Net 30. Interest and/or late fees will be charged past due accounts.

Rental clients must provide a **Certificate of Insurance** naming "The Washington Source, Inc." as **Loss Payee** at full replacement value of the equipment.

Proper operation and knowledge of the equipment is the responsibility of the renter. The Washington Source for Lighting, Inc. is not responsible for failure of the equipment due to operator error or unfamiliarity of operation technique.

I hereby consent and authorize The Washington Source, its principals, agents, or assigns to conduct an investigation into my credit background as they deem necessary to assist them in their decision to entrust me with their property of value or to extend credit to me. I understand that information from credit reporting agencies will be used in this effort and I consent to such information being released to the above named. I understand that in the event that credit is denied, I have the right to request in writing a copy of my credit report from the credit agency.

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_  
By (Signature) \_\_\_\_\_ (Print) \_\_\_\_\_  
Title: \_\_\_\_\_

Student Proviso

Name of College or University: \_\_\_\_\_ Department: \_\_\_\_\_  
Course Name and Number: \_\_\_\_\_ Instructor: \_\_\_\_\_  
Title and Description of Project: \_\_\_\_\_  
Insurance provided by University  Insurance provided by Student