



Home Office  
854 N Central St; Knoxville, TN 37917  
Phone: (865) 525-0811 Fax: (865) 523-3395

Serving East Tennessee with  
Rental Stores in these cities:  
Home Office: 854 N Central St • Knoxville, TN 37917  
854 N. Central • Knoxville, TN 37917  
3042 Boones Creek Rd. • Gray, TN 37615

## CREDIT APPLICATION

Mail or Fax to Home Office  
Incomplete or unsigned applications will not be processed.

Company Name: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date Business Started: \_\_\_\_\_ Federal ID #: \_\_\_\_\_ Tax Exempt: Yes  No

Check one: Corporation  Partnership  Proprietorship  L. L. C.  Tax #: \_\_\_\_\_  
(If exempt, attach blanket certificate of resale)

Equipment Protection Plan (EPP): Accept  Decline  (If decline, attach or forward certificate of insurance).

### COMPANY OFFICERS, PARTNERS OR PROPRIETOR

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Secretary/Treasurer's Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

### CREDIT REFERENCES (Attach Additional references if desired)

Name: _____	Name: _____	Name: _____
Street: _____	Street: _____	Street: _____
City, St., Zip: _____	City, St., Zip: _____	City, St., Zip: _____
Phone: ( ) _____	Phone: ( ) _____	Phone: ( ) _____
Account #: _____	Account #: _____	Account #: _____

(Home Office Use Only, Do Not Write In This Space)		
Date Open: _____	Date Open: _____	Date Open: _____
High Credit: _____	High Credit: _____	High Credit: _____
Current Bal.: _____	Current Bal.: _____	Current Bal.: _____
History: _____	History: _____	History: _____
Terms: _____	Terms: _____	Terms: _____

### PRIMARY BANK

Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, St., Zip: \_\_\_\_\_  
Bank Officer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Annual volume of business \$ \_\_\_\_\_ (Previous 12 Months).

Credit line desired \$

Job Location:

Special Instructions (Purchase order required, Persons authorized to order, Persons authorized to pick up, etc.)

In order for Knox-Tenn Rental & Sales Company to better serve your needs, we ask that you please indicate the appropriate code that best corresponds to your primary business.

- |  |  |
|--|--|
| <input type="checkbox"/> A .....LANDSCAPE CONTRACTOR                       | <input type="checkbox"/> K .....MANUFACTURER                       |
| <input type="checkbox"/> B .....SINGLE FAMILY HOME CONTRACTOR              | <input type="checkbox"/> L .....MASONRY CONTRACTOR                 |
| <input type="checkbox"/> C .....GENERAL CONTRACTOR OR EXCAVATOR            | <input type="checkbox"/> M .....MINING CONTRACTOR                  |
| <input type="checkbox"/> D .....HIGHWAY / STREET CONTRACTOR                | <input type="checkbox"/> N .....PLUMBING, HEATING & AIR CONTRACTOR |
| <input type="checkbox"/> E .....ENVIRONMENTAL CONTROL & CHEMICAL           | <input type="checkbox"/> O .....OTHER                              |
| <input type="checkbox"/> F .....ELECTRICAL CONTRACTOR                      | <input type="checkbox"/> P .....PAINTING / SANDBLASTING CONTRACTOR |
| <input type="checkbox"/> G .....UTILITY, RAILROAD & TRANSPORTATION CONTROL | <input type="checkbox"/> Q .....PAINTING / REMODELING CONTRACTOR   |
| <input type="checkbox"/> H .....INDIVIDUAL HOME OWNER                      | <input type="checkbox"/> R .....ROOFING / SHEET METAL CONTRACTOR   |
| <input type="checkbox"/> I .....COMMERCIAL / INDUSTRIAL                    | <input type="checkbox"/> S .....STEEL ERECTION CONTRACTOR          |
| <input type="checkbox"/> J .....DRY WALL / PLASTERING CONTRACTOR           | <input type="checkbox"/> T .....SWIMMING POOL / SPA CONTRACTOR     |

**Applications without a code indicated will not be processed**

"This information is given to establish an open account status. We agree to make full payment to **KNOX-TENN RENTAL & SALES COMPANY** within thirty (30) days following invoice date. Permission is granted to inquire as to our credit worthiness from any source. We understand that service (finance) charges of 1 1/2% will be added to any past due invoices. We further agree to pay said services charges. We agree to pay any fees for the collection of this account."

- Authorization is herewith given for purchases/rentals and deliveries to be made without the signature of Officer, .... Partner or Owner.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Typed or Printed Signature: \_\_\_\_\_

**APPLICATIONS WITHOUT AUTHORIZED SIGNATURE WILL NOT BE PROCESSED.**

**INDIVIDUAL PERSONAL GUARANTY**

I, \_\_\_\_\_ (Your Name), residing at \_\_\_\_\_

\_\_\_\_\_ (Your Address) and in consideration of your extending credit at my request to \_\_\_\_\_ (Company Name) of which I am \_\_\_\_\_

(Title) hereby personally guarantee to you the payment at **KNOX-TENN**

**RENTAL & SALES COMPANY**, in the state of Tennessee, 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 by the Company whenever the Company fails 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. I do hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

Signature: \_\_\_\_\_

<b>(HOME OFFICE USE ONLY)</b>	
Date: _____	Approved By: _____
Account #: _____	Limit: _____
EPP Document Sent: _____	



I, \_\_\_\_\_ (Your Name), hereby consent(s) to **KNOX-TENN's** use of a non-business consumer credit report on the undersigned in order to further evaluate the credit worthiness of the undersigned as principal(s), proprietor(s) and/or guarantor(s) in connection with the extension of business credit as contemplated by this credit application. The undersigned hereby authorize(s) **KNOX-TENN** to ;utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the business credit represented by this credit application. The undersigned as an individual(s) hereby knowingly consent to the use of such credit report consistent with the Federal Fair Credit Reporting Act as contained in 15 U. S. C.@1681 et seq..

Date: \_\_\_\_\_

Signature: \_\_\_\_\_