



Authorized MEC Dealer  
Rental-Sales-Service

3847 Duck Creek Drive  
Stockton, CA 95215

Phone: (209) 466-4399  
Fax: (209) 466-3385

## APPLICATION FOR CREDIT

\_\_\_\_\_  
Name of Company or Individual

\_\_\_\_\_  
Contractor License #

\_\_\_\_\_  
Physical Address

\_\_\_\_\_  
Years at this Address

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Fax

1. \_\_\_\_\_

Name(s) of Principal(s)

Address

State

Zip

Phone

2. \_\_\_\_\_

3. \_\_\_\_\_

### Please Check One

Please Charge Damage Waiver on Rentals

We Will Supply a Certificate of Insurance Covering Rented Equipment

Please Check One  Corporation  Partnership  Sole Proprietor

Credit Limit Required \_\_\_\_\_

\_\_\_\_\_  
Bank

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Bank Person to Contact

\_\_\_\_\_  
Fax

References: Please Supply Three Major Suppliers (Please No Rental Co.)

1. \_\_\_\_\_

Name

Address

Phone

2. \_\_\_\_\_

3. \_\_\_\_\_

*In consideration of American Scissor Lift, INC., extending credit we certify that the above information is true and correct. We fully understand the terms of agreement and agree to pay invoices on receipt.*

Print Name \_\_\_\_\_

Sign \_\_\_\_\_

Date \_\_\_\_\_

Title \_\_\_\_\_