☐ **CORPORATE OFFICE**
WINCHESTER EQUIPMENT CO.
121 Indian Hollow Rd.
Winchester, VA 22603
Telephone: (800) 323-3581
Fax: (540) 667-8063
www.winchesterequipment.com

☐ **BOBCAT OF N. VIRGINIA**
Bristow, VA 20136
Telephone: (800) 323-3581
www.bobcatofnvirginia.com

☐ **BOBCAT OF TIDEWATER**
Virginia Beach, VA 23464
Telephone: (800) 323-3581
www.bobcatoftidewater.com

☐ **BOBCAT OF RICHMOND**
Ashland, VA 23005
Telephone: (800) 323-3581
www.bobcatofrichmond.com

☐ **VALLEY EQUIPMENT CO.**
Harrisonburg, VA 22802
Telephone: (800) 323-3581
www.valley-equipment.com

CREDIT ACCOUNT APPLICATION
(Please Print or Type)

☐ BUSINESS ☐ CONSUMER

Date: _____

Telephone No: _____
Fax No: _____
Cell No: _____
Website: _____
E:Mail: _____

Legal Name of Firm or Person: _____

Partnership ☐ Sole Proprietorship ☐ Corporation ☐ LLC ☐ # Years in Business _____

Bill To
Address: _____ City: _____ State: _____ Zip _____

Ship To
Address: _____ City: _____ State: _____ Zip _____

Tax Federal I.D. No. _____ or Social Security No. _____

PRINCIPAL MEMBERS OF FIRM:

Name: _____ Title: _____ DUNS # _____
Name: _____ Title: _____ Res. Phone _____
Name: _____ Title: _____ Res. Phone _____
Name: _____ Title: _____ Res. Phone _____

BANK REFERENCE:

Name: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip _____

OPEN ACCOUNT REFERENCES: (TRADE REFERENCES)

	Name of Credit Reference	City, State	Fax No.	Telephone No.	Account No.
1					
2					

CREDIT LINE FOR: **PARTS** ☐ **SERVICE** ☐ **RENTAL** ☐

We make application for credit on an open account with your firm based on the following terms:
Terms: Payment is due within 30 days following date of purchase.
No finance charge is made on accounts paid within 30 days of purchase. Accounts not paid within 30 days will be charged 1.5% each month which is an annual percentage rate of 18%.

LIST PERSONS WHO ARE AUTHORIZED TO SIGN:

Name: _____ S.S. No. _____
Name: _____ S.S. No. _____

IS A PURCHASE ORDER REQ'D?
YES ☐
NO ☐

WILL PURCHASES BE TAXABLE ☐ **OR** EXEMPT ☐ (If exempt, we must have proper exemption certificate on file.)

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history to answer questions about your experience with me. Applicant acknowledges receipt of the equal opportunity notice. Applicant attests a personal guarantee that will assure payment of any amount correctly charged to this account. In the event of non-payment, applicant will pay any and all reasonable legal and collection fees for payment of this account.

Signature of Applicant: _____ Print Name: _____

DO NOT WRITE IN THIS BOX

Date Rec'd _____
☐ Approved ☐ Rejected
By: _____ Date: _____

REMARKS

cc:

APPROVAL:

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applications on the basis of sex, race or marital status. The Federal Agency which administers compliance with this Law is the Federal Trade Commission of Washington, DC

WE LOOK FORWARD TO SERVING YOU!