



OFFICE USE ONLY		
APPROVED: <input type="checkbox"/> Yes <input type="checkbox"/> No	BY: _____	
DATE: _____	LIMIT: _____	
ACCOUNT # _____		

APPLICATION FOR CREDIT: Bunce Rental, Inc. & American Party Place
 Mail or Fax to:
BUNCE RENTAL INC. ♦ 4516 SO. TACOMA WAY, TACOMA, WA 98409 ♦ PHONE: (253) 472-3347 ♦ FAX: (253) 472-3320

TYPE OF BUSINESS: CORPORATION LIMITED LIABILITY CO GENERAL PARTNERSHIP
 (CHECK ONE) SOLE PROPRIETORSHIP MUNICIPALITY NON-PROFIT OTHER _____

BUSINESS NAME			DATE
BUSINESS STREET ADDRESS	CITY	STATE	ZIP
MAILING ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP
BUSINESS PHONE	FAX PHONE	EMAIL ADDRESS	
HOW LONG IN BUSINESS	NATURE OF BUSINESS		
CONTRACTORS LICENSE NUMBER	EXP DATE	SALES TAX RESALE # (applies to purchase of certain merchandise only, not rental)	
BOND COMPANY	BOND NUMBER		
BUSINESS BANK AND BRANCH	CHECKING ACCT. #	NAME OF BANK REP.	

OWNER'S INFORMATION (LIST ALL OWNERS OR PARTNERS, USE ADDITIONAL SHEETS IF NECESSARY)

1) _____
 Name Address
 SSN# WDL# Phone

2) _____
 Name Address
 SSN# WDL# Phone

3) _____
 Name Address
 SSN# WDL# Phone

HAVE YOU OR ANY OTHER OWNER OR OFFICER EVER DONE BUSINESS WITH BUNCE RENTAL? Yes No
 IF YES, WHEN: _____ UNDER WHAT NAME: _____

HAVE YOU PERSONALLY, OR ANY COMPANY FOR WHICH YOU ACTED AS AN OFFICER, DECLARED BANKRUPTCY IN THE LAST 7 YEARS?
 Yes No IF YES, PLEASE ATTACH DESCRIPTION ON A SEPARATE SHEET.

REFERENCES (PLEASE LIST FOUR OPEN ACCOUNTS)

1) _____
 Name Phone Account # How Long Account Open
 Mailing Address City State Zip

2) _____
 Name Phone Account # How Long Account Open
 Mailing Address City State Zip

3) _____
 Name Phone Account # How Long Account Open
 Mailing Address City State Zip

4) _____
 Name Phone Account # How Long Account Open
 Mailing Address City State Zip

ACCOUNT INVOICING AND AUTHORIZATIONS

Bunce Rental, Inc. has undertaken an initiative to become a "greener" company, and we ask that you assist us in this process. We would like to either fax or email our billed invoices, as well as end-of-month statements. We thank you in advance for your cooperation!

- Please e-mail our invoices / statements to: _____
or
- Please fax our invoices / statements to: _____

Charge Authorization: Please check the appropriate box(es) that you wish to require:

- Purchase Order
- Job Site or Number

Authorized Users Only (Please use the following lines to list your current authorized users)

You may change the authorized users list at any time by amending this instrument with written notice to Bunce Rental, Inc. stating the changes. If you do not designate "authorized account users", Bunce Rental, Inc. is then authorized to rent to anyone requesting to charge to the account.

EQUIPMENT PROTECTION PLAN

Many of our customers find that their insurance does not cover damage to rental equipment. Therefore, to eliminate the risk of accidental damage, Bunce Rental offers an optional equipment protection plan. This plan alleviates the customer from incurring additional expense due to damage or destruction for any reason except by unexplained disappearance, theft, misuse, or neglect. Tire damage, bits, blades, etc. are specifically excluded.

The optional protection service is calculated at a percentage of the total rental amount and acceptance must be on each rental contract. However, for the convenience and protection of account customers, blanket acceptance or rejection can be indicated for all of your rental contracts. Acceptance below does not affect your ability to reject the plan on selected contracts.

Please Initial One:

_____ I / We wish to accept the Equipment Protection Plan, unless otherwise noted on the contract.

_____ I / We **DO NOT** wish to accept the Equipment Protection Plan. I / We agree to pay the amount necessary to repair any damage sustained while the equipment is being rented.

*** If the Equipment Protection Plan is rejected, a certificate of insurance from your insurance agent showing coverage for rental equipment is required.**

TERMS – Net 10th

In signing this application, I/We do so with the understanding that I/We agree to pay all purchases by the 10th of the following month. I/We also understand that any bill not paid by the 10th of the month is past due and will be treated as such. Also, if it becomes necessary to effect collection, whether litigation ensues or not, I/We agree to pay reasonable court costs, attorney fees, accrued interest, and related collection costs.

All rentals, sales, repairs, and services ordered and/or delivered are subject to Bunce Rental, Inc.'s terms and conditions of sale. Any modification and/or alteration by purchase orders, purchase agreement, or contract must be in writing and signed by an officer of our corporation only. This provision takes precedence over all subsequent actions; written, oral, direct, or implied, subject to compliance with the above stated requirements.

The undersigned hereby agrees to be personally liable for the charges; and if this is a corporate application, that all officers and directors of the company agree to be jointly and severally liable for the charges.

I/We hereby certify all statements to be true and correct, and understand a thorough credit investigation will be conducted, including the investigation of banking, consumer, and commercial inquiries to satisfy the company's requirements for the extension of credit, and accordingly I/We hereby authorize the disclosure of such information to the company.

Signature	Title	Date
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Any previous names under which credit references or credit histories may be obtained: _____

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of sex or marital status. The Federal Agency which administers compliance with this law concerning this firm is the Federal Trade Commission, Washington, D.C. 20416.