



Crown Equipment Rental Co Inc
1580 E Cliff Rd Burnsville MN 55337
952-894-7368



Credit Application

Please fill out application and return to:

Brittany Vruno – Office Manager
1580 E Cliff Rd
Burnsville, MN 55337
952-894-7368
Fax: 952-882-2934
Email: Brittany@crowrent.com



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Business Credit Application

All Applications must be completed and signed prior to processing

Type of Business: _____ Date Started: _____
 Company Name: _____ Email: _____
 Address: _____ D & B Number: _____
 City, State, Zip: _____ Tax ID#: _____
 Phone Number: _____ Resale # (copy must be attached): _____
 Fax Number: _____ Contact Name: _____

Bank Reference:

Name: _____ Phone Number: _____
 City, State, Zip: _____ Fax Number: _____
 Contact Name: _____ Account Number: _____
 Type of Account: _____

Officers, Owners, Partners or Principals:

Name & Title: _____ Name & Title: _____
 Home Address: _____ Home Address: _____
 City, State, Zip: _____ City, State, Zip: _____
 Social Sec. #: _____ Social Sec. #: _____

Trade References:

Company Name: _____ Company Name: _____
 City, State, Zip: _____ City, State, Zip: _____
 Phone Number: _____ Phone Number: _____
 Fax Number: _____ Fax Number: _____
 Account #: _____ Account Number: _____

Company Name: _____ Company Name: _____
 City, State, Zip: _____ City, State, Zip: _____
 Phone Number: _____ Phone Number: _____
 Fax Number: _____ Fax Number: _____
 Account #: _____ Account Number: _____

Business Credit Applicant ("Company") acknowledges that the above information is true and accurate. The undersigned individual(s) warrant(s) that he and/or she is/are authorized to execute this application. The signature below serves as authorization to receive both personal and company credit information necessary to process this application. Company agrees to pay all costs incurred to Crown Equipment Rental Co Inc in collecting past due balances, including reasonable attorney's fees. Collection fees, finance charges, and NSF check fees. This AGREEMENT is entered into a Dakota County, State of Minnesota and will be governed by the laws of the State of Minnesota, and shall for all purposes be construed and enforced in accordance with Minnesota law. Any Disputes hereunder shall be resolved in the courts of Dakota County, State of Minnesota.

Signature/Title: _____ Date: _____



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Charge Account
 Authorized Buyers/ Special Instructions

If there are restrictions on who may sign for material, please list below:
 Authorized Signatures (Please Print):

1. _____ DL#: _____
 Cell # _____
2. _____ DL#: _____
 Cell # _____
3. _____ DL#: _____
 Cell # _____

(See Attached sheet for additional if needed.)

The Account Requires:	YES	NO
Purchase Order	_____	_____
Job Identification	_____	_____
Verification with Office	_____	_____
Damage Waiver Accepted (If not we will need a Cert of Insurance)	_____	_____
Tax Exempt	_____	_____
Special Billing Address:	_____	_____

If so: _____

Signed: _____

Comments:



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Estimated Monthly Rentals/Purchase's: \$ _____

Billing Address: _____

City: _____

State: _____ Zip: _____

Accounts Payable Contact: _____ Phone: _____

Email: _____

Would you prefer invoices: (More than one can be checked)

Mailed _____

E-Mailed _____

Given to Employee _____

All accounts are a Net 30 from invoice/work order date.

For any and all invoice/work order inquiries, please contact Brittany Vruno at 952-715-6831 or
Brittany@crowrent.com



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Authorized User List (Extra Page if needed)

Name: _____ DL# _____

Employee Cell# _____

Name: _____ DL# _____

Employee Cell# _____

Name: _____ DL# _____

Employee Cell# _____

Name: _____ DL# _____

Employee Cell# _____

Name: _____ DL# _____

Employee Cell# _____

Name: _____ DL# _____

Employee Cell# _____

Name: _____ DL# _____

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Name: _____ DL# _____

Employee Cell# _____

Name: _____ DL# _____

Employee Cell# _____



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Personal Guaranty

In consideration for the extension of credit or increase in credit limit by Crown Equipment Rental Co. Inc, ("Seller") to buyer, the undersigned does jointly and severally personally guarantee to pay and be responsible for payment of all sums, balances and accounts due to Seller by buyer, including collection charges and/or attorneys' fees prior to and subsequent to judgment entered by a court of law. This shall be an open and continuing guaranty and shall continue in full force and effect, notwithstanding any changes in the form of such indebtedness or renewals or extensions granted by Seller without obtaining any consent thereto and until expressly revoked by written certified notice from undersigned to Seller. Any such revocation shall not in any manner affect the undersigned/s liability as to any indebtedness existing prior thereto. The undersigned does hereby waive notice of the acceptance of this agreement, notice of default or non-payment and waive action required by the statute against buyer. No delay on Seller's part in exercising any right hereunder, or taking any action to collect or enforce payment of any obligation hereby guaranteed either against the buyer or any other person primarily or secondarily liable with the buyer shall operate as a waiver of any such right or in any manner prejudice Seller's right against the undersigned.

The undersigned agrees that in the event of any default at any time by said buyer, Seller shall be entitled to look to the undersigned immediately for full payment without prior demand or notice. If a dispute should arise, buyer expressly waives the right to a jury trial. This agreement has been entered into in the State of Minnesota, to which this agreement has been returned (Dakota County Stat of Minnesota), will be governed by the laws of the State of Minnesota, shall for all purposes be construed and enforced in accordance with Minnesota law, and venue for all disputes shall be as follows:

District Court in and for State of Minnesota

The terms and conditions of this continuing personal guaranty are understood and agreed to by the signing party.

Signed: _____ Driv. Lic. #: _____
 Date: _____ State: _____ Tel#: _____
 Name(Print): _____ SS# _____
 Home St. _____ Personal Bank: _____
 Address: _____ Account#: _____
 City: _____ State: _____ Branch: _____