2525 Clay Bank Rd.
Fairfield, CA. 94533
PH 707-429-3884
FX 707-429-5285
E-mail: rbane@allstarents.com
Re: Web Site

CREDIT AGREEMENT

(we can not process this credit agreement without the fields marked required)

_____

Company Name (Required)

_____

Physical Address (Required) City State Zip

_____

Mailing Address if different then physical. City State Zip

_____ @ _____

Area Code/Telephone (Required) **Area Code/Fax (required)** **e-mail accounts payable department (required)**

BUSINESS INFORMATION Accounts Payable Contact**:** _____ **(required)**

Type of Ownership: [ ] Sole Proprietorship [ ] Partnership [ ] Corporation [ ] Government [ ] Other

Federal Tax ID Number _____ **(Required)** *If sole proprietorship please fill in SS#.*

Year Established _____ Contractor's License # _____ Expiration date: _____

Have you ever filed for Bankruptcy? [ ] No [ ] Yes Date Filed _____

WE CHARGE A EQUIPMENT PROTECTION PLAN COVERING ACCIDENTAL DAMAGE TO OUR EQUIPMENT/VEHICLES. IF DECLINED, PLEASE ATTACH REQUIRED CERTIFICATE OF INSURANCE, SHOWING THAT INSURANCE IS PROVIDED FOR ANY DAMAGE TO ALL RENTED EQUIPMENT/VEHICLES.

IF REQUESTED, CUSTOMER AGREES TO FURNISH INFORMATION REQUIRED TO SEND A PRELIMINARY 20-DAY NOTICE, RIGHTS TO LIEN, STOP NOTICE AND BOND NOTICE.

IF EQUIPMENT IS RENTED FOR MORE THAN 4 WEEKS, PERIODIC UNSIGNED INVOICES WILL BE ISSUED FOR RENTAL CHARGES DUE. ALL SUCH INVOICES ARE DUE AND PAYABLE NET 30 FROM DATE OF INVOICE.

I AGREE THAT MY ACCOUNT MAY BE DEBITED ELECTRONICALLY FOR THE FACE AMOUNT OF ANY NSF CHECKS PLUS A $25.00 FEE.

I ACKNOWLEDGE AND AGREE THAT INTEREST AT THE CURRENT RATE OF 1.5 PERCENT PER MONTH WILL BE CHARGED ON ALL BALANCES REMAINING AFTER 30 DAYS FROM THE DATE SAID AMOUNTS ARE INCURRED. IN THE EVENT OF DEFAULT AND/OR REFERRAL TO AN ATTORNEY OR COLLECTION AGENCY, I AGREE TO PAY ALL COSTS OF COLLECTION INCLUDING REASONABLE ATTORNEY'S FEES. CUSTOMER AGREES THAT PROPER JURISDICTION AND VENUE FOR ANY COURT ACTION OR ARBITRATION HEARING SHALL BE IN SOLANO COUNTY, CALIFORNIA. ALL CHARGES SUBJECT TO TERMS AS STATED ON THIS AGREEMENT AND BOTH FRONT AND BACK OF RENTAL/SALES INVOICE.

I AUTHORIZE ALL STAR RENTS TO OBTAIN CREDIT REPORTS, TRADE REPORTS AND BANK REFERNCES FOR THE PURPOSE OF DETERMINING THE EXTENSION OR CONTINUATION OF CREDIT TO CUSTOMER

I PERSONALLY AGREE TO PAY FOR AND GUARANTEE PAYMENT OF ALL CHARGES TO OUR ACCOUNT(S), ACCORDING TO THE TERMS AND CONDITIONS STATED ON THE CREDIT AGREEMENT AND RENTAL CONTRACTS. THE ABOVE INFORMATION IS COMPLETE AND ACCURATE AS OF THE DATE OF THIS AGREEMENT.

YOU MUST SIGN BELOW. IF THERE IS NO SIGNATURE BELOW YOU CREDIT AGREEMENT WILL NOT BE PROCESSED TO OPEN AN ACCOUNT WITH ALL STAR RENTS.

x_____

SIGNATURE **(MUST BE OFFICER, PARTNER, OR SOLE OWNER)** OF COMPANY

_____

NAME (PLEASE PRINT) DATE