



2525 Clay Bank Rd. Fairfield, CA. 94533 PH 707-429-3884 FX 707-429-5285 WEB SITE
--

CREDIT AGREEMENT (must include either email or fax for processing)

Account Name _____

Physical Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

Previous Address (if less than 2 years at current address) _____ City _____ State _____ Zip _____

Area Code/Telephone _____ Area Code/Fax (required) _____ @ _____ email (required) _____

BUSINESS INFORMATION Accounts Payable Contact: _____ (REQUIRED)

Type of Ownership: Sole Proprietorship Partnership Corporation Government

Other _____

Federal Tax ID Number _____ Year Established _____

Contractor's License # _____ Expiration date: _____

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

WE CHARGE A DAMAGE WAIVER 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 REFERNES 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.

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

NAME AND TITLE (PLEASE PRINT)

DATE