



## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

\* Indicates **REQUIRED** information

Business Contact Information			
*FEIN:		*AP Contact & <u>Email</u> :	
*Company name:			
*Phone:	Fax:	*E-mail:	
*Registered company address:			
*City:		*State:	*ZIP Code:
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:
Business and Credit Information			
Primary business address:			
City:		State:	ZIP Code:
How long at current address?			
Telephone:	Fax:	E-mail:	
*Bank name:		*Contact:	
Bank address:		*Phone:	
City:		State:	ZIP Code:
Business/Trade References			
* Company name (1):		* Contact & <u>Email</u> :	
Address:			
City:		State:	ZIP Code:
* Phone:		Fax:	
Type of account:			
* Company name (2):		* Contact & <u>Email</u> :	
Address:			
City:		State:	ZIP Code:
* Phone:		Fax:	
Type of account:			
* Company name (3):		* Contact & <u>Email</u> :	
Address:			
City:		State:	ZIP Code:
* Phone:		Fax:	
Type of account:			
Agreement			
By submitting this application, you authorize Street Smart Rental, Inc. to make inquiries into the banking and business/trade references that you have supplied.			
Signatures			
Signature:		Signature:	
Name and Title:		Name and Title:	
Date:		Date:	

Please complete and return to Josh at [jkoch@streetsmartrental.com](mailto:jkoch@streetsmartrental.com)  
Toll Free: 1-888-653-6800