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Mobile Offices ♦ Modular Buildings ♦ Ground Level Storage Containers

APPLICATION FOR CREDIT

Physical Address :

 Name of Firm or Individual _____ Years in Business: _____ Years at this address: _____

 Address _____ Phone Number with Area Code _____

City _____ State _____ Zip _____ Fax Number with Area Code _____

Hereby applies for credit in accordance with the terms & conditions of:
 Mailing Address if different than Physical Address above: _____ Credit Manager : _____

 Address _____

 City _____ State _____ Zip _____

1st billing is in advance
OUR NORMAL CREDIT TERMS
 There after, Net 10 Days

The following information must be provided. It will be held in the strictest confidence.
 Ownership: _____ Corporation _____ Check here if incorporated within the past 12 months _____ Partnership _____ Individual

Name(s) of Principal(s)

1) _____
 Name _____ City _____ State _____ Zip _____ Phone Number with Area Code _____

2) _____

3) _____

4) _____

Finance:

 Bank _____ City _____ State _____ Zip _____ Phone Number with Area Code _____

 Bank Officer _____ Department _____ Branch _____

References:

1) _____
 Business Name _____ City _____ State _____ Zip _____ Phone Number with Area Code _____

2) _____

3) _____

4) _____

Complete this section to have credit card billed: Type of Card: _____ Visa _____ MasterCard _____ American Express _____ Discover

Account Number: _____ Exp. Date: _____ Signature Panel Code: _____

Name/Business on the card: _____

Billing Address: _____

 City _____ State _____ Zip _____

I authorize A-1 Portable Buildings and the financial institution designated in this application to charge my credit card, as indicated by completing the above credit card information, for payment of my A-1 Portable Buildings monthly bill. I understand that both the financial institution and A-1 Portable Buildings reserve the right to terminate this payment plan and/or my participation therein. I also understand that at any time I may elect to discontinue my enrollment in this plan by providing notice to A-1 Portable Buildings in writing. You must notify us if your account changes. If there are changes we will send you a new form to complete so we have your signature and the new account information. An invoice will still be mailed to you.

Card Holders Signature: _____

FORM MUST BE COMPLETED ENTIRELY :
 We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.
 Signed: _____ Title: _____ Date: _____