



Pipp Mobile Storage Systems, Inc.
2966 Wilson Drive NW
Walker, MI 49534
800-234-7477
sales@pippmobile.com
www.pippmobile.com

Credit Application

Line of Credit Requested
Business Name
Type of Business
DBA
Duns #
Phone
Fax
Address
For Past years
City/State/Zip
Accounts Payable Contact
Email
AP Phone
AP Fax
Federal Tax ID #
How long in Business
Tax Exempt:
Date Established

If you are tax exempt, we must receive your state resale/exempt certificate or taxes will be assessed.

Mortgage Holder/Landlord
Address
Phone
Does State, County, or City require a License?
License #

Ownership
Sole Proprietorship
Partnership
Corporation

Principal:
(Name) (Title) (SS#)
Principal:
(Name) (Title) (SS#)
Principal:
(Name) (Title) (SS#)

Trade References
(must include FAX number and phone number)

Name _____ Account # _____
Address _____ Fax Number _____
City/State Zip _____ Phone Number _____

Name _____ Account # _____
Address _____ Fax Number _____
City/State Zip _____ Phone Number _____

Name _____ Account # _____
Address _____ Fax Number _____
City/State Zip _____ Phone Number _____

Name _____ Account # _____
Address _____ Fax Number _____
City/State Zip _____ Phone Number _____

Bank References

Name _____ Account # _____
Address _____ Contact _____
City/State Zip _____ Phone Number _____

Name _____ Account # _____
Address _____ Contact _____
City/State Zip _____ Phone Number _____

of Employees _____ Est. Annual Sales _____ Sales Area _____

Credit Application

Has the firm or any of its principals ever been Bankrupt? Yes No

If Yes, explain _____

Any misrepresentation in this credit application will be considered evidence of fraud, since this information is the basis for the extending of credit. As an inducement to grant credit, the undersigned warrants that the information submitted is true and correct. You are authorized to investigate the credit references and principals listed.

In consideration for the extension of credit, said business promises to pay for all purchases within the terms agreed (net 30) and agrees to pay a service charge per month of 1-1/2% per month (18% annual percentage rate) on all past due balances. In the event any third parties are employed to collect any outstanding monies owed by said business, the undersigned agrees to pay reasonable collection costs., including attorney fees, whether or not litigation has commenced, and all costs of litigation incurred. The undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Name of Business _____			
Print Name _____	Title _____	Signature _____	Date _____
Print Name _____	Title _____	Signature _____	Date _____

Personal Guarantee

In consideration for **Pipp Mobile Storage Systems/Denstor Mobile Storage Systems** extending credit to the business identified below for any materials and/or services after this date at the request of applicants or its agents, the undersigned individual hereby personally guarantees unconditionally and irrevocably the prompt payment of any sums now or hereafter owed to **Pipp Mobile Storage Systems/Denstor Mobile Storage Systems** by the business identified below whether said sums are due under open account, contract, or otherwise.

It is understood and agreed that credit, if extended, is to be on a continuing basis and may exceed estimated maximum credit limited required as stated in the credit agreement between **Pipp Mobile Storage Systems/Denstor Mobile Storage Systems** and the business. **Pipp Mobile Storage Systems/Denstor Mobile Storage Systems** shall not be obligated to notify the undersigned of the dates or amounts of any such credit and the undersigned waives demand, notice of default and any extension of time or any other forbearance which may be extended by **Pipp Mobile Storage Systems/Denstor Mobile Storage Systems**.

This guaranty shall continue in force until notice in writing, sent by registered or certified mail, return receipt requested is received by **Pipp Mobile Storage Systems/Denstor Mobile Storage Systems**. Said notice shall specify the date on which this guaranty is to be terminated; said date not to be less than seven days after such notice is received. Such termination shall in no way release the undersigned as to any sum or debt incurred prior to such termination.

Date: _____ Name: _____
Name of person guaranteeing payment, NO TITLE

Home Address _____

City State Zip _____ Social Security No: _____

Signature of Person guaranteeing payment _____

Name of Business whose account is guaranteed _____

Line of Credit: Approved / Denied	Credit Dept Use Only Amount _____	Date _____
Comments _____		