Tidewater Storage Trailer Rentals, Inc Credit Application

Credit & Accounts Payable Information *REQUIRED*



Account Name:		
Federal ID#:	CorporationLLCL	LP Sole Proprietorship Other
Billing Address:		
City:	State	Zip Code
Phone #	Fax #	AP Phone #
AP Contact:	AP E	imail:
Preferred Invoice Delivery Method: Email Address for Invoices:	Email US Mail	
Preferred Payment Method: Check	Credit/Debit Card	ACH Money Order
Would you be interested in Credit/De	bit Card Auto Pay? Yes	No
Would you be interested in us setting	us setting up automatic ACH payme	ents? Yes No
Are you tax exempt? Yes No	If yes, you MUST send u	us your tax exempt certificate.
Do you require purchase order or job Do you require jobs to be billed separ job name or PO#, or location?	rately? Invoices can be sent with all j	No Job #'s Yes No Job bbs on one invoice or they can be sent separated by obs/PO# separate Image: Constraint of the sent separated by obs/PO# separate Image: Constraint of the sent separated by obs/PO# separate
	Bank & Trade Refere	·
Bank Name:	Bank Address:	
Bank Phone #:	Bank City, State	, Zip:
Trade Company Name	Contact Person	Phone # and/ or Email
	Company Policies	S
month of rental fees, delivery fee, pic	k up fee and applicable taxes. We cl	pt. Initial invoices for new rentals will include the 1st narge BOTH delivery and pick up fees upfront so that es or fees for damages, there are no other fees due.
Prices quoted and charged are CON contractors or competitors.	-IDENTIAL. We ask that they are no	ot shared with any other companies, contractors, sub-
Customers must make sure ground c	condtitions are adequate and ready for	or delivery. Customers are responsible for damages to

By signing below, you agree that the above information is correct and true AND you have read the company policies and agree to adhere to above policies

> **Printed Name** Title Date:

Signature

containers or trailers while on rent.