



CREDIT APPLICATION

SALESPERSON: \_\_\_\_\_  
 EMAIL TO: \_\_\_\_\_

www.columbusequipment.com

Name \_\_\_\_\_ Parent Company \*\* \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_ PO Box \_\_\_\_\_ City \_\_\_\_\_  
 County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Shipping Address \_\_\_\_\_  
 Email Address \_\_\_\_\_ Gross Annual Revenue \$ \_\_\_\_\_

**BUSINESS STRUCTURE**  
 Individual  Corporation  Partnership  LLC  LLP/LP  DBA \_\_\_\_\_

STATE OF REGISTRATION AND STATE REGISTRION #	YEAR BUSINESS STARTED	FEDERAL ID #/SS #
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OFFICERS/MEMBERS & TITLE	ADDRESS	PHONE NUMBER	SOCIAL SECURITY #	OWN %

BANK REFERENCE				
NAME OF BANK	PHONE NUMBER	CONTACT PERSON	LOAN NUMBER	BALANCE

EQUIPMENT FINANCING REFERENCES			
FINANCE COMPANY	PHONE NUMBER	CONTACT PERSON	ACCOUNT NUMBER

TRADE REFERENCES		
NAME	CITY, STATE	PHONE NUMBER

KUBOTA CREDIT INFORMATION		
INSURANCE AGENCY	INSURANCE AGENT	AGENT PHONE #
GUARANTOR NAME	GUARANTOR MONTHLY INCOME	GUARANTOR EMAIL
< 2 YEARS IN BUSINESS, LIST PREVIOUS EMPLOYER	< 2 YEARS IN BUSINESS, PREVIOUS MONTHLY INCOME	< 2 YEARS IN BUSINESS, PREVIOUS EMPLOYER PHONE

Individual applicants must provide valid drivers license with application

Return completed application to salesperson

Contact us at (614) 443-6541 with any questions

**\*\* Applicants with parent company or personal guarantors must also sign appropriate guarantor section on page 2**

By signing below, the undersigned individual(s), who is/are either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Columbus Equipment Company (hereafter known as "Company"), its designee, and any assignee or potential assignee thereof, authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal, or extension of such credit or additional credit and for reviewing or collecting the resulting account. A digital or physical copy of this authorization shall be valid as the original. I/we affirm my/our identity as the respective individuals identified in the above application. Also, the undersigned authorizes Company to obtain information about the undersigned from any credit reporting agency; hereby authorizes the named bank(s), financial institution(s) or trade reference(s) to releaser such information as is necessary to establish credit with Company; and hereby grants express permission to Company, its designee or any assignee to transmit to any facsimile machine of the undersigned any information relating to any products purchased by the undersigned with credit established with Company or its designee. Company reserves the right not to extend further credit to accounts that are not current.

I/We certify that each of the statements made and answers given in this application is true and correct and this application is made for the purpose of inducing Company to extend credit to the Applicant. I/We understand that this application for credit and all accounts specifically set up for the Applicant shall be governed by and construed under the laws of the State of Ohio, specifically those of Franklin County. Applicant agrees that in the event of a default that he/she/it will consent to and be subject to the jurisdiction of the Courts of the State of Ohio, Franklin County, to enforce the terms of this application for credit. I/We further agree to reimburse Company for its legal fees involved in the collection of any monies owed as a result of the Applicant's failure to pay in a timely fashion on the Applicant's open accounts with Company and/or any other legal fees incurred as a result of the Applicant's breach of contract with Company. Finance charges will be assessed on past due invoices at a rate of 1.5% monthly/18% annually. Open credits as a result of overpayment or duplication of payment will first be applied to any past due invoices before being refunded to Applicant. Credit memos not taken by 60 days from issuance will be applied to oldest past due balance. I/We understand that that unless Company has been notified in writing, Company is hereby authorized to permit any employee of the undersigned Applicant to charge materials and services to the account of said Applicant. I/We understand that any Parent Company/Affiliate/Guarantor listed in the above application is jointly and severally liable to Company for any and all outstanding charges the Applicant fails to pay. I/We further understand that by signing below, the officer or representative of the Parent Company/Affiliate/Guarantor claims individual responsibility to make Company whole should the Parent Company/Affiliate/Guarantor fail to do so.

Estimated Machine Purchase Price \$ \_\_\_\_\_ P.O. Required Yes \_\_\_\_\_ No \_\_\_\_\_

Taxable: Yes \_\_\_\_\_ No \_\_\_\_\_ (Valid tax exemption certificate must be presented)

I acknowledge that I furnished the information given herein to obtain credit and warrant that it is true and agree to all as stated herein.

### ***Applicant***

Name of Authorized Signer \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

### ***Parent/Affiliate Company Guarantor***

If the Applicant is a business entity with a Parent/Affiliate company noted on page 1 of application, then the person signing this agreement, acknowledges the responsibility of Parent/Affiliate to act as Guarantor for all debts incurred by Applicant and guarantees payment under this agreement as a representative of the Guarantor.

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(on behalf of the Guarantor entity)

### ***Personal Guarantee***

If the Applicant is a business entity, then the person signing below whether signed as an officer or partner or not, personally guarantees payment under this agreement. The undersigned unconditionally guarantees to Columbus Equipment Company the full and prompt payment of any and all indebtedness, which may at any time be owing to Columbus Equipment Company by corporation, partnership, LLC, LLP, or any other business structure, and the undersigned agrees to pay all indebtedness. The obligations and liabilities of Applicant and the undersigned guarantor shall be joint and several.

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(individually and on behalf of the Applicant entity)