

Individual or Personal Credit Application



And our Family of Companies



Thank you for requesting a credit application with East Tenn. Rent-Alls, Inc. You can drop the completed application off at our office, or e-mail it to creditapp@etra.biz. Please allow up to 1 week for processing. We will contact you if additional information is needed.

Application Date: _____ Amount of Credit Requested per Month: _____

NAME _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Phone _____ Cell _____ How long at address _____

Social Security # _____ Driver's License#(scan required) _____ Issued _____ Expire _____

Previous Address(if less than 3 yrs at current) _____ City _____ State _____ Zip _____

Employer _____ Address _____ City _____ State _____

Employed yrs? _____ Gross Salary per month _____ Other Income _____ Source _____

Previous Employer(if less than 3 yrs at current) _____ Address _____ City _____ State _____

Name and Address of nearest Relative not living with you _____

Relationship _____ Phone _____ Cell # _____

Email address _____ **ALL STATEMENTS WILL BE EMAILED.**

WE NO LONGER MAIL STATEMENTS.

CO-APPLICANT

NAME: _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Phone _____ Cell _____ How long at address _____

Social Security # _____ Driver's License#(scan required) _____ Issued _____ Expire _____

Previous Address(if less than 3 yrs at current) _____ City _____ State _____ Zip _____

Employer _____ Address _____ City _____ State _____

Employed yrs? _____ Gross Salary per month _____ Other Income _____ Source _____

Previous Employer(if less than 3 yrs at current) _____ Address _____ City _____ State _____

Name and Address of nearest Relative not living with you _____

Relationship _____ Phone _____ Cell # _____

Email address _____

Are you Tax Exempt: _____Tax Exempt #:_____ Expiration Date:_____

**IF YES, YOU MUST INCLUDE TAX EXEMPTION FORM WITH THE APPLICATION
BEFORE WE CAN CONSIDER YOU EXEMPT.**

Are there only certain people allowed to charge or pickup equipment under your account?

If yes, please list names:

Name:_____ Name:_____

Name:_____ Name:_____

Name:_____ Name:_____

Have You Rented Tools/Equipment from Any Other Rental Company? If so: Who and Where:

1. _____

2. _____

In order for the application to be processed, please complete name, address, phone and email of FOUR(4) trade supplier with whom you have done business. do not use charge cards (Visa, Mastercard, etc.) or insurance company.

Trade Name 1: _____ Trade Name 2: _____

Email Address: _____ Email Address: _____

Person to Contact: _____ Person to Contact: _____

Phone: _____ Phone: _____

Trade Name 3: _____ Trade Name 4: _____

Email Address: _____ Email Address: _____

Person to Contact: _____ Person to Contact: _____

Phone: _____ Phone: _____

CREDIT REPORT AUTHORIZATION FORM

By my signature below I, _____, (print) authorize EAST TENNESSEE RENT-ALLS INC. to obtain a Consumer and or Business credit report on myself or Company. This authorization is valid for purposes of verifying information given on this credit application and determining my eligibility for credit, renewal of credit and future credit, and any other lawful purpose covered under the FAIR CREDIT REPORTING ACT (FCRA).

By my signature below, I hereby authorize all corporations, credit agencies, educational institutions, law enforcement agencies, businesses, and persons to release all information they may have about me. This authorization shall be valid in original and/or copy form.

Signed by Applicant: _____ Dated _____

Terms And Conditions

Please Read and Sign The Following:

1. THE UNDERSIGNED HEREBY AGREES THAT OUR TERMS OF SALE AND RENTAL ARE NET 28 DAYS FROM THE DATE OF THE INVOICE. ANYTHING THAT IS NOT PAID WITHIN THESE TERMS BECOMES PAST DUE, AND A SERVICE CHARGE OF 1½ PERCENT PER MONTH (18% PER ANNUM) WILL BE ADDED ON ANY PAST DUE PORTION AND MUST BE PAID IN FULL. IF THE ACCOUNT SHOULD RUN OVER 60 DAYS PAST DUE, THE ACCOUNT WILL BE PLACED ON A HOLD STATUS UNTIL ALL PAST DUE INVOICES AND FINANCE CHARGES ARE PAID IN FULL. THIS CAN BE DONE WITHOUT NOTIFICATION TO THE ACCOUNT HOLDER.
2. PURCHASER AGREES TO EXAMINE ALL INVOICES AND STATEMENTS PROMPTLY UPON RECEIPT AND TO NOTIFY SELLER IMMEDIATELY OF ANY FAILURE OF DELIVERY, SHORTAGE, DISCREPANCY, OR ERROR. PURCHASER FURTHER AGREES THAT SUCH INVOICES OR STATEMENTS SHALL BE PRESUMED CORRECT UNLESS OUR OFFICE IS NOTIFIED IN WRITING WITHIN 27 DAYS OF SUCH FAILURE OR DELIVERY, SHORTAGE, DISCREPANCY OR ERROR. IT SHALL BE PRESUMED THAT THE PURCHASER RECEIVED INVOICES, AND STATEMENTS ON OR BEFORE THE FIFTEENTH (15TH) DAY OF THE MONTH SUCCEEDING PURCHASE.
3. IN THE EVENT OF DEFAULT OF PAYMENT AND IF THE SAME IS PLACED FOR COLLECTION, THE UNDERSIGNED AGREES TO PAY THE FULL AMOUNT, PLUS ENTIRE COLLECTION COST, INCLUDING ALL ATTORNEY'S FEE AND ANY COURT COST AND FINES INCURRED OR AWARDED. PLEASE REFER TO SECTION 18 "MISCELLANEOUS" ON THE BACK OF EACH CONTRACT/INVOICE FOR COMPLETE DETAILS
4. THE UNDERSIGNED AGREES THAT ANY CHANGES OR OWNERSHIP, OFFICERS, OR FORM OF BUSINESS SHALL BE MADE KNOWN IN WRITING TO EAST TENN. RENT-ALLS, INC.,

P.O. BOX 3856, JOHNSON CITY, TN 37602.
5. THE UNDERSIGNED DOES HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT & ALSO AGREES TO ALL TERMS AND CONDITIONS OF THE RENTAL CONTRACT / INVOICE

OWNER, PARTNERS, OR OFFICIAL SIGNATURE: _____ TITLE: _____ DATE: _____

Print NAME: _____ OFFICIAL TITLE: _____ DATE SIGNED: _____

This application will not be considered complete until originals are received.

YOU MAY REQUEST A FULL COPY OF OUR DAMAGEWAIVER POLICY AT THE FRONT COUNTER. IF YOU CHOOSE NOT TO ACCEPT THE DAMAGE WAIVER, WE WILL NEED A COPY OF YOUR CERTIFICATE OF INSURANCE FROM YOUR INSURANCE CARRIER SHOWING COVERAGE OF RENTAL EQUIPMENT AND THE POLICY AMOUNT AND EXPIRATION DATE. YOU MAY FAX THE CERTIFICATE TO OUR OFFICE AT 423-283- 4149.

East Tennessee Rent-Alls, Inc. & Companies

Rental Equipment Damage Waiver

THIS IS NOT INSURANCE AGAINST ANY LOSS OR DAMAGE

accepted by renter, Lessor (East Tennessee Rent-Alls, Inc. / Celebrate Rentals / Bobcat of Mountain Empire) agrees in consideration of an additional charge of 10 percent of the gross rental charges on this contract and its subsequent periodic invoices, to modify the responsibility of RENTER as indicated below, file a report with the proper law enforcement authorities, and furnish a copy to Lessor within 48 hours of the incident. By renter accepting the Damage Waiver, Lessor waives certain claims against the renter incurred from the direct loss of the rental equipment by fire, theft, or burglary (provided there is evidence of forced entry) of the rental equipment or vandalism of the rental equipment except as follows:

1. Scaffolding and all scaffolding accessories.
2. heft (other than burglary), abuse, theft by conversion, theft by persons entrusted with the equipment, intentional destruction, loss due to mysterious or unexplained disappearances.
3. Damage or loss occasioned by acts of God (windstorm, hail, lightning, flood, etc.).
4. Damages resulting from neglect or misuse.
5. Use of the equipment in violation of any of the terms of this contract.

Renter's Liability to Lessor is a deductible in the amount of the FOUR (4) WEEKS rental fee for the equipment listed on the front of this contract of each claim for loss as a result of fire, theft, or vandalism. Accessories such as air hoses, tool steel, electric cords, blades, welding cables, and other similar items are excluded from this plan. Renter's payment of Lessor's invoice with the Damage Waiver will be considered acceptance of the Damage Waiver. Accrued rental charges cannot be applied against any deductible. Renter agrees to

If Renter has Insurance covering loss of Rented Equipment, Renter shall have their Insurance company provide Lessor, in advance of any rental a certificate of insurance indicating sub-limit dollar amount for equipment rented from others. Renter shall exercise all rights available to them under said insurance, take all action necessary to process said claim and renter further agrees to assign said claim and any and all proceeds from such claim from such Insurance to Lessor.

NOTE: CERTIFICATE OF INSURANCE MUST SPECIFICALLY STATE THAT COVERAGE IS EXTENDED TO RENTED EQUIPMENT. FAX CERTIFICATES OF INSURANCE TO (423) 283-4149, OR MAIL TO EAST TENN. RENT-ALLS; P.O. BOX 3856, JOHNSON CITY, TN 37602; ATTN: JOSH BAXTER

If Renter Declines the Damage Waiver, the renter agrees to pay and be responsible for any and all loss or damage to the equipment until same has been returned to the Lessor, whether or not such loss or damage to the equipment is due to the negligence of the renter, their agents, or employees. In the event equipment is lost or stolen, the renter agrees to be responsible for actual cash value of said equipment. Accrued rental charges cannot be applied against the actual cash value of said equipment. The cost of any repairs will be borne by the renter, whether performed by Lessor, or, at Lessor's option, by others. LESSOR RESERVES THE RIGHT TO CANCEL THIS PROTECTION PLAN BY MAIL

COST OF THE Damage Waiver IS 10% OF THE GROSS AMOUNT OF RENTAL CHARGES ON THIS CONTRACT AND IT'S SUBSEQUENT INVOICE

Please E-mail Complete Credit Application to creditapp@etra.biz or mail to address 3711 Bristol Hwy Johnson City, TN 37601.