NEW ACCOUNT APPLICATION



BASIC INFORMATION

6315 W Highway 146 Crestwood, KY 40014 www.skye.rentals 502-678-SKYE

Thank you for choosing Skye Equipment Rentals! We are excited to serve you. Please complete the application below to set up your new account.

First Name:		Last Name:		
Email Address:		CC Emails (optional):		
Mobile Phone Number:		Business Phone Number:		
BUSINESS INFORMATION				
Company Name:		Street Address:		
Suite:		City:		
State:		Zip Code:		
ACCOUNTING INFORMATION				
Accounts Payable Name:		Accounts Payable Email:		
Accounts Payable Phone:				
Purchase Order # Required? YES NO		Job # or Job Location Required? YES NO		
Tax Exempt? YES NO (If yes, please send your exemption form along with this application)				
Do you have commercial insurance that covers rented equipment? YES NO NOT SURE				
PAYMENT PREFERENCES				
Please select the payment terms you would prefer:				
Credit Card 3% Convenience Fee Applies	Net Check or ACH. 1%	-	Net 30 Check or ACH	

- \rightarrow If requesting Net 10 or Net 30 terms, please fill out page 2 below.
- \rightarrow If not, please skip to page 3.

CREDIT APPLICATION

COMPANY INFORMATION					
Date Opened for Business:		Estimated Annual Sales:			
Average Monthly	Rental Volume:		Credit Amount Req Optional, only use if requ		or Net 30 terms
Federal Tax ID (F	FEIN) #:		Duns (if applicable)	#:	
CHECK ONE:	Sole Proprietor	Partnership	Corporation	LLC	Non-Profit

BANK REFERENCES		
Institution Name:	Institution Name:	Institution Name:
Account #:	Account #:	Account #:
Account Type:	Account Type:	Account Type:
Contact Name:	Contact Name:	Contact Name:
Phone:	Phone:	Phone:

TRADE REFERENCES			
Company Name:	Company Name:	Company Name:	
Contact Name:	Contact Name:	Contact Name:	
Phone:	Phone:	Phone:	
Account Opened Since:	Account Opened Since:	Account Opened Since:	
Credit Limit:	Credit Limit:	Credit Limit:	
Current Balance:	Current Balance:	Current Balance:	

SIGNATURE

I hereby certify that the information contained herein is complete and accurate. IF APPLYING FOR CREDIT: I understand and agree that this information will be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Printed Name:	Title:
Signature:	Date:

Please send completed applications to <u>customerservice@skye.rentals</u> (there is no .com at the end)

PLEASE ALLOW 3-5 BUSINESS DAYS FOR US TO PROCESS YOUR APPLICATION.

THANK YOU FOR YOUR BUSINESS - WE LOOK FORWARD TO SERVING YOU!

