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### **NEW CUSTOMER CREDIT APPLICATION**

#### **Company Information**

Individual/Company Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Mailing Address (if Different) \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_  
Email \_\_\_\_\_ Website \_\_\_\_\_  
Company Ownership \_\_\_\_\_ Corp \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietor  
Principal Owner(s) \_\_\_\_\_ Years in Business \_\_\_\_\_  
Soc. Security or Federal E.I.N. Number \_\_\_\_\_  
Pa Sales Tax Exempt? \_\_\_\_ No \_\_\_\_ Yes: Exempt Number \_\_\_\_\_  
(Attach PA Sales Tax Exemption Certificate)  
Accounts payable contact \_\_\_\_\_  
Monthly statements \_\_\_\_\_ Email \_\_\_\_\_ Mail \_\_\_\_\_  
Amount of credit requesting \$ \_\_\_\_\_

**\*\*Terms: Net 30 Days – Finance Chg. of 1½% Per Month (18% Yr) Over 30 Days\*\***

Bank Information: Name \_\_\_\_\_  
Checking Account Number \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_ Contact Person \_\_\_\_\_

### **Business References Holding Current Credit**

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ Fax # \_\_\_\_\_  
E-mail \_\_\_\_\_ Website \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ Fax # \_\_\_\_\_  
E-mail \_\_\_\_\_ Website \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ Fax # \_\_\_\_\_  
E-mail \_\_\_\_\_ Website \_\_\_\_\_

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Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

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Name printed \_\_\_\_\_ Title \_\_\_\_\_