

# CREDIT APPLICATION



**Farrell Equipment & Supply Co., Inc.**

**Eau Claire**

715-835-4334  
Fax: 715-835-4356  
1510 N. Hastings Way  
Eau Claire, WI 54703

**Appleton**

920-903-1985  
Fax: 920-903-8278  
1002 Truman Street  
Kimberly, WI 54136

**La Crosse**

608-796-9300  
Fax: 608-796-9435  
508 Monitor Street  
La Crosse, WI 54603

**Madison**

608-222-5372  
Fax: 608-222-5405  
6809 Mangrove Lane  
Monona, WI 53713

**Rochester**

507-252-0234  
Fax: 507-252-0222  
1635 3rd Avenue S.E.  
Rochester, MN 55904

**Wausau**

715-355-8300  
Fax: 715-298-1662  
7405 Commerce Drive  
Weston, WI 54476

## INSTRUCTIONS

Note: FAILURE TO INCLUDE FAX NUMBERS FOR REFERENCES will result in application being returned without processing. Credit application processing could take up to 3 days or more according to how prompt your references respond. Please fill out the following credit application making sure to have the proper signatures on the second page and fax back to 715-835-4356. If you are tax-exempt, please enclose a tax-exempt certificate, without the form your purchases will include tax until we receive the tax-exempt form. If you have any questions please call us at 715-835-4334. Thank you for your assistance. This credit application is presented to you by the request of our representative:

**FAX TO: 715-835-4356**

or mail to: 1510 N. Hastings Way, Eau Claire, WI 54703

### Customer Information:

(Check all that apply)

Company Legal Name: \_\_\_\_\_ ☐ Commercial ☐ Residential ☐ Other: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ County: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Company Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Requested Credit Line: \$ \_\_\_\_\_

Legal Status: ☐ Corporation ☐ Partnership ☐ LLC ☐ LLP ☐ Sole Proprietorship ☐ Other: \_\_\_\_\_ Years in business: \_\_\_\_\_

Fed Tax ID#: \_\_\_\_\_ Date of Incorporation: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

Taxable Status: ☐ Taxable ☐ Non-Taxable (attach copy of exemption certificate, otherwise sales tax will be charged).

### Officers / Owners of Company:

1) Name: \_\_\_\_\_ Title: \_\_\_\_\_ Home Address: \_\_\_\_\_

S.S. #: \_\_\_\_\_ Cell/Home Phone: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Driver's License # \_\_\_\_\_ State Issued \_\_\_\_\_

2) Name: \_\_\_\_\_ Title: \_\_\_\_\_ Home Address: \_\_\_\_\_

S.S. #: \_\_\_\_\_ Cell/Home Phone: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Driver's License # \_\_\_\_\_ State Issued \_\_\_\_\_

3) Name: \_\_\_\_\_ Title: \_\_\_\_\_ Home Address: \_\_\_\_\_

S.S. #: \_\_\_\_\_ Cell/Home Phone: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Driver's License # \_\_\_\_\_ State Issued \_\_\_\_\_

### Credit References (NO Banks, Material and Product Suppliers Only) - three references are required:

1) Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

2) Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

3) Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

### Account Preferences:

Do you require Purchase Orders: ☐ Yes ☐ No      Do you require Job Numbers: ☐ Yes ☐ No

Persons authorized to purchase: \_\_\_\_\_

## SALES AGREEMENT

The undersigned in consideration for the terms of sale herein and for the extension of credit by Farrell Equipment & Supply Co., Inc. hereby agrees that the terms of sale are: **Net 30 days**, and further, that 1-1/2% per month service charge (18% per annum) will be added on any past due portion. In event of default in payment, and if the same is placed in the hands of an attorney for collection, the undersigned agrees to pay all costs of collection, including a reasonable attorney's fee. The undersigned does hereby certify that the information contained is true and correct, and that no bankruptcy has been taken, nor any judgements are open, and further, agrees that any changes in ownership, officers, or form that the business operates as shall be made known to Farrell Equipment & Supply Co., Inc.

The undersigned, as an inducement to grant credit, warrants that the information submitted is true and correct. You are authorized to investigate the credit references listed above.

\_\_\_\_\_  
Name (Owner/ Officer) Title Signature

\_\_\_\_\_  
Name (Owner/ Officer) Title Signature

## INDIVIDUAL PERSONAL GUARANTEE

I \_\_\_\_\_ (individual), residing at \_\_\_\_\_,  
for and in consideration of your extending credit at my request to \_\_\_\_\_  
(name of Company) of which I am \_\_\_\_\_ (title), hereby personally guarantee  
payment to Farrell Equipment Supply Co., Inc. in the state of Wisconsin any obligation of the Company  
and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the  
Company whenever the Company shall fail to pay the same. It is understood that the guarantee shall be  
a continuing and irrevocable guarantee and indemnity for such indebtedness of the Company. I do here-  
by waive notice of default, non-payment and notice thereof and consent to any modification or renewal  
of the credit agreement hereby guaranteed.

\_\_\_\_\_  
Signature \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date Witness



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or mail to: 1510 N. Hastings Way, Eau Claire, WI 54703

### Office Use Only

References Checked By: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Date Letter Sent: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Credit App \_\_\_\_\_ Credit Ref \_\_\_\_\_ Credit Ln \_\_\_\_\_ Date \_\_\_\_\_ Store Code: EC LAX WA RO