



Edward R. Bacon Company Inc.

255 Fitzgerald Avenue 5210 Florin Perkins Road
 San Martin, CA 95046 Sacramento, CA 95826
 Phone 408-846-1600 Phone 916-383-8250
 Fax 408-846-0121 Fax 916-381-1386

CREDIT APPLICATION
 COMPLETE APPLICATION AND
 RETURN FAX TO 408-846-0121

NAME OF BUSINESS		DATE	
BUSINESS ADDRESS		CITY, STATE	ZIP CODE
BUSINESS PHONE #	FAX #	CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIATORSHIP <input type="checkbox"/>	DATE ESTABLISHED
FEDERAL TAX I.D. NUMBER	RESALE NUMBER	NATURE AND SCOPE OF BUSINESS ENTERPRISE	

BUSINESS PRICIPALS	RESIDENCE ADDRESS	SOCIAL SECURITY NUMBER

HAVE YOU EVER HAD A REPOSESSION? <input type="checkbox"/> YES <input type="checkbox"/> NO	PRINCIPAL'S DRIVERS LICENSE NUMBER
HAVE YOU EVER DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO	

LIST THREE CREDIT REFERENCES	PHONE NUMBER	FAX NUMBER

NAME OF BANK FOR BUSINESS CHECKING ACCOUNT	ADDRESS	PHONE NUMBER
NAME OF BANK FOR GENERAL BUSINESS ACCOUNT	ADDRESS	PHONE NUMBER

BY EXECUTING THIS CREDIT APPLICATION, APPLICANT HEREBY AGREES THAT IN THE EVENT THAT CREDIT IS GRANTED AND THEREAFTER APPLICANT FAILS TO PAY ANY INDEBTEDNESS IN A TIMELY MANNER, APPLICANT SHALL PAY ALL ATTORNEYS FEES AND COSTS INCURRED IN COLLECTION OF SAID DEBT. APPLICANT ALSO HEREBY GRANTS A LIEN ON ANY PROPERTY OF APPLICANT IN THE POSSESSION OF EDWARD R. BACON COMPANY INC. TO SECURE SAME. APPLICANT DECLARES UNDER PENALTY OF PERJURY THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT. APPLICANT UNDERSTANDS THAT THIS APPLICATION IS SUBMITTED TO EDWARD R. BACON COMPANY INC. FOR THE PURPOSE OF ESTABLISHING CREDIT AND THAT THE EDWARD R. BACON COMPANY INC. SHALL RELY ON THIS APPLICATION IN EXTENDING CREDIT. THE PARTIES AGREE THAT THE RATE OF 1-1/2% PER MONTH IS FAIR AND EQUITABLE FOR LESSOR'S SERVICE COSTS. ANY ACCOUNT GOING OVER 90 (NINETY) DAYS PAST DUE WILL AUTOMATICALLY BECOME C.O.D. TERMS ARE NET 30 (THIRTY) DAYS.

SIGNATURE OF APPLICANT _____ PRINT NAME _____ TITLE _____	OPEN ACCOUNT CREDIT LIMIT REQUESTED \$ _____ CREDIT REQUESTED FOR THE PURPOSE OF:	FOR OFFICE USE ONLY \$ _____ CREDIT LIMIT APPROVED APPROVAL DATE ERBCO APPROVAL BY
	<input type="checkbox"/> EQUIPMENT PURCHASES	
	<input type="checkbox"/> EQUIPMENT RENTALS	
	<input type="checkbox"/> PARTS PURCHASES <input type="checkbox"/> SHOP REPAIRS	