



APPLICATION FOR CREDIT
Confidential Credit Information

HEAD OFFICE:
 1281 TOPSAIL ROAD
 MOUNT PEARL, NL A1N 5G3

TEL: (709) 747-5558
 FAX: (709) 747-5569
 www.sssupplyltd.com
 accounting@ssupplyltd.com

CUSTOMER INFORMATION

LEGAL COMPANY NAME IN FULL		<i>PLEASE PRINT OR TYPE</i>		DATE OF APPLICATION	
TRADE NAME SAME <input type="checkbox"/> OR				<input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION	
STREET ADDRESS		UNIT NO.	CITY	PROVINCE	POSTAL CODE
P.O. BOX (IF APPLICABLE)		TELEPHONE NO. WITH AREA CODE		FAX NO. WITH AREA CODE	
EMAIL	WEBSITE		CELL NO.		

TYPE OF BUSINESS

<input type="checkbox"/> HOME BUILDER	<input type="checkbox"/> HEATING / AIR CONDITIONG / REFRIDGERATION	<input type="checkbox"/> PROPERTY MAINTENANCE / MANAGEMENT	<input type="checkbox"/> INDUSTRIAL / COMMERCIAL BUILDER	<input type="checkbox"/> ELEVATOR INSTALLATION / REPAIR
<input type="checkbox"/> PLUMBING	<input type="checkbox"/> MANUFACTURING	<input type="checkbox"/> GENERAL CONTRACTOR	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> DEMOLITION
<input type="checkbox"/> RENOVATOR	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> LANDSCAPING	<input type="checkbox"/> DEVELOPER	<input type="checkbox"/> OTHER _____
NUMBER OF EMPLOYEES _____	DATE OF REGISTRATION / INCORPORATION		ESTIMATED ANNUAL RENTAL VOLUME \$	



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PRINCIPALS

CONTACTS

NAME IN FULL		<input type="checkbox"/> PARTNER
		<input type="checkbox"/> SOLE OWNER
		<input type="checkbox"/> SIGNING OFFICER
RESIDENTIAL ADDRESS	CITY	POSTAL CODE
DRIVERS LICENSE NUMBER	TEL. NO. WITH AREA CODE	
NAME IN FULL		<input type="checkbox"/> PARTNER
		<input type="checkbox"/> SOLE OWNER
		<input type="checkbox"/> SIGNING OFFICER
RESIDENTIAL ADDRESS	CITY	POSTAL CODE
DRIVERS LICENSE NUMBER	TEL. NO. WITH AREA CODE	

FINANCE / ADMINISTRATION:

NAME: _____

EMAIL: _____

PHONE: _____

ACCOUNT PAYABLE:

NAME: _____

EMAIL: _____

PHONE: _____

PURCHASING:

NAME: _____

EMAIL: _____

PHONE: _____

PROJECT / JOB MANAGER:

NAME: _____

EMAIL: _____

PHONE: _____

PURCHASE & RENTAL INSTRUCTIONS (SEE SEC. 4 – TERMS & CONDITIONS)

<input type="checkbox"/> OBTAIN WRITTEN P.O. ONLY	<input type="checkbox"/> SHOW JOB SITE ON INVOICE	<input type="checkbox"/> RENT ONLY TO _____
<input type="checkbox"/> PHONE OFFICE FOR AUTHORIZATION AND / OR P.O.	<input type="checkbox"/> OTHER INSTRUCTIONS (SPECIFY) _____	



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TERMS AND CONDITIONS GOVERNING USE OF CHARGE ACCOUNT

In consideration for granting credit by S & S Supply Ltd. (hereinafter referred to as "S & S Supply") to the Applicant for credit (hereinafter referred to as "Applicant") the Applicant specified in this Application for Credit and S & S Supply's covenant, promise and agree as follows:

1. The Applicant agrees to be fully responsible and liable for all use made of the Applicant's account with S & S Supply by any agent or representative of the Applicant and to abide by the terms and conditions specified by S & S Supply's Rental Contracts as they may appear from time to time.
2. The Applicant agrees to pay interest on its account with S & S Supply when overdue at the rate of 1% per month. Unless otherwise specified, the Applicant's account shall be considered overdue unless paid on or before the 31st day following the date of each Invoice to be sent by S & S Supply to the Applicant at the Applicant's address specified in this Application for Credit. The Applicant further agrees to pay the full balance owing on its account including applicable interest charges upon written notice by S & S Supply requiring same to be sent by S & S Supply to the applicant to the Applicant's address specified in this Application for Credit.
3. The Applicant agrees should S & S Supply have to retain solicitors to collect the outstanding balance of the Applicant's account, in order to contribute to S & S Supply's costs in that regard, and exclusive of any costs which may be awarded to S & S Supply in any court of competent jurisdiction, to pay to S & S Supply in addition to the outstanding balance due on account a sum equal to the greater of \$100.00 or 5 per cent of the outstanding balance due on account.
4. It is understood and agreed that while every effort will be made by S & S Supply to obtain the requisite authorization at the time an order is taken, S & S Supply shall at all times be entitled, in accordance with the terms and conditions set forth on the rental and sale contracts, to collect all debts in respect of rentals or sales to the Applicant made in the normal course of business, notwithstanding failure to receive the requisite authorization and, in addition, S & S Supply shall not be liable for loss or damages, direct or indirect, consequential or otherwise in the event such authorization is not obtained.
5. The Applicant agrees that S & S Supply Ltd may obtain/release credit and/or personal information as may be required, at any time, in connection with the credit hereby applied for or any renewal or extension thereof from any source. The Applicant authorizes their bank to release all financial information regarding their current savings and outstanding loan accounts. If this credit application agreement is signed by a representative of a corporation or a partnership, the said individual warrants that he or she has the requisite authority to execute this document and bind the corporation or partnership to its terms.



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PROOF OF INSURANCE INFORMATION/AUTHORIZATION FORM

Dear Sir/Madam:

As a user of S & S Supply's equipment, we require that adequate insurance coverage is maintained when renting equipment with a retail value greater than \$10,000. S & S Supply will require your insurance information to be forwarded to our office in order to avoid any disruption to your business.

Have your insurance broker or insurer forward to us an endorsement to your policy, confirming the following:

- 1) **Insured:** The Name, Policy Number and Date of Expiry.
- 2) **General Liability:** The minimum acceptable coverage is \$2,000,000. Inclusive of bodily injury and property damage, per occurrence.
- 3) **Contractors Equipment All-Risk Physical Damage:** There should be coverage to the full purchase value of the equipment with the deductible not to exceed 1%.
- 4) **Automobile Liability:** This section is applicable to licensed vehicles. The minimum acceptable coverage is \$1,000,000 inclusive limits for bodily injury and property damage, per occurrence.
- 5) **Additional Named Insured and Loss Payee:** Only with respect to the machinery supplied by us, arising out of the Named Insured's operations, S & S Supply Ltd. is added to the policy as an ADDITIONAL NAMED INSURED AND LOSS PAYEE.
- 6) **Notification:** S & S Supply Ltd. will be notified 30 days prior to the cancellation of any of the above policies, or alteration in such a manner as to affect this certificate.

By providing this information, we will be able to respond to your needs in a much more efficient manner and will avoid any misunderstanding, should a loss occur.

AGENCY: _____

ADDRESS: _____

INSURANCE COMPANY: _____

POLICY #: _____ **EXPIRES:** _____

PHONE: _____ **FAX:** _____

You are hereby authorized to contact my agent / broker to verify insurance coverage.

DATE: _____ **APPLICANT SIGNATURE:** _____