

## **Customer Information and Agreement**

Legal Name or Trade Style:					
Billing To Address:					
City:				Zip:	
Main Phone:		Website:			
Location Address:					
City:				Zip:	
Type of Organization:   Corporation:	tion 🗆	Partnership	□ Sole Proprietor	☐ Other	
☐ Tax-Exempt (If checked,	please include	a copy of the Tax	-Exempt Certificate)		
Type of Business:					
EIN#:					
State of Incorporation (Attach W-9):		# of `	Years in Business:		
Contact for Invoices:		#E	Title:	_	
Email:		Phone:	Fax:		
Principals (Officers):					
Do you issue Purchase Orders:	☐ Yes	$\square$ No			
Preferred invoice delivery method:	$\square$ USPS	☐ Email:	5		
Full Name of Person/People authorized to make purchases			Position	Position / Title	
In consideration for granting of credit by E (A) That the information provided her (B) Applicant agrees to allow Elliott-L (C) Applicant will be bound by the Te (D) Applicant agrees to pay all charg (E) Applicant agrees to pay a monthl for each month following the due date that (F) Applicant agrees to pay, in additive reasonable attorneys' fees, which Elliott-Leteration in the content of the c	rein by applicant Lewis Corporation erms & Condition es within Elliott-L y service charge an invoice rema on to any accrue	is true and correct in to check with ban as of this Agreement Lewis Corporation to of 1.5 percent per ains unpaid.	and will be used to make credi k / financial institutions and tra t. erms, Net 30 days from invoice month, which is an annual per nd the invoice amount, any exp	de references provided.  c. centage rate of 18 percent penses, including	
Digital Signatures are accepted.					
Signature:			Date:		
Name:			Title:		
Approved by:			Title:		
Sautter Crane Rental					
The completed applic	ation should be	e sent via email to	Sandy Ruddy or your Sale	sperson	

If you have any questions, please contact Sandy at sruddy@elliottlewis.com or (215) 698-5983