



800-410-7330 • 540-966-4000

Lawrence Equipment Company
CASE CE • CASE AG • Equipment Repair
Roanoke, VA Waynesboro, VA
Bridgewater, VA Ashland, VA
Suffolk, VA

Lawrence Trailer & Truck Equipment
Trailers • Truck Bodies • Parts • Service
Ashland, VA



800-296-6009 • 804-798-6006

Return Completed Credit Applications to dingram@lawrencecompanies.com, your salesperson or your local branch.

BUSINESS NAME: _____ PHONE # _____

TRADE NAME: _____ FAX # _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

BUSINESS ADDRESS: _____ TIN#: _____ TYPE OF BUSINESS: _____

CITY: _____ STATE: _____ ZIP: _____ E-MAIL ADDRESS: _____

TYPE OF BUSINESS: () CORPORATION () PROPRIETORSHIP () PARTNERSHIP () LLC - YEARS IN BUSINESS _____

OWNER'S NAME: _____ TITLE _____ SS# _____

HOME ADDRESS: _____ CITY _____ STATE _____ ZIP _____

OWNER'S NAME: _____ TITLE _____ SS# _____

HOME ADDRESS: _____ CITY _____ STATE _____ ZIP _____

BANK REFERENCE:

NAME: _____ ADDRESS: _____

CITY, STATE, ZIP _____ ACCOUNT NUMBER: _____

TELEPHONE NUMBER _____ FAX NUMBER _____ CONTACT _____

AUTHORIZATION SIGNATURE FOR BANK TO RELEASE CREDIT INFORMATION: (X) _____

TRADE REFERENCES:

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

**LAWRENCE EQUIPMENT, INC. and LAWRENCE TRAILER & TRUCK EQUIPMENT, INC.
CREDIT APPLICATION
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The information contained in this application is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment, Inc. to investigate the references listed pertaining to my/our credit and financial responsibility.

(Signature of Owner or Officer) _____ (Title) _____ (Date)
Social Security Number _____ - _____ - _____

(Signature of Owner or Officer) _____ (Title) _____ (Date)
Social Security Number _____ - _____ - _____

Security:
I grant to you a security interest under provisions of the Uniform Commercial Code in the merchandise purchased and a mechanical lien on any equipment that the merchandise is incorporated into.

Payment Terms:
All invoices will be paid on or before the 30th day following the invoice date.

Service Charges:
There will be a service charge of 1 ½% per month on invoices, or part thereof, that are delinquent beyond the terms of Net 30 days from the invoice date.

Disputed Balances:
Applicant(s) agree to withhold only the disputed portion of a past due balances. The remaining balance must be paid when due.

Legal Matters:
Applicant(s) understands and agrees that this application and all purchase orders accepted by Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment, Inc. shall be deemed to be a contract made, and to be performed, in the County of Botetourt, VA and construed in accordance with the laws of VA. Any dispute arising between the applicant(s) and Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment, Inc. will be resolved by suit brought in the state or federal courts in VA. The applicant(s) understands and agrees that if Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment, Inc. retains an attorney to collect any unpaid balance, the applicant(s) agree to pay Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment, Inc. reasonable attorney's fees and legal expenses incurred to enforce this agreement.

Unconditional Personal Guaranty ((Optional)):
In exchange for Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment Inc.'s agreement to extend credit to the applicant(s), I/we agree to unconditionally personally guarantee the debt of the applicant(s) with Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment, Inc. This is a guaranty of payment, not of collection. I/We agree to pay Lawrence Equipment, Inc. or Lawrence Trailer & Truck Equipment, Inc.'s reasonable attorney's fees and other legal expenses incurred to enforce this guaranty.

(Name of Guarantor) _____ (Signature of Guarantor) _____ (Date)

(Social Security Number)

(Name of Guarantor) _____ (Signature of Guarantor) _____ (Date)

(Social Security Number)

(FOR INTERNAL USE ONLY)
Account # : _____ Credit Limit/LOC: _____ Terms: _____
Approver: _____