

HIGHWAY 55 RENTAL ACCOUNT TERMS

INVOICES ARE MAILED OFF AT CONTRACT CLOSING. AFTER YOU RECEIVE THE COPY OF YOUR CLOSED INVOICE, PAYMENT IS DUE IN 10 DAYS. INVOICES THAT ARE NOT PAID IN THIRTY(30) DAYS WILL BE CONSIDERED PAST DUE AND FINANCE CHARGES WILL OCCUR. MONTHLY STATEMENTS ARE MAILED OUT ON THE FIRST OF EACH MONTH.

ACCOUNTS OVER THIRTY-ONE(31) DAYS WILL BE NOTIFIED OF THEIR PAST DUE STATUS. EVERY ATTEMPT WILL BE MADE TO BRING THE ACCOUNT TO A CURRENT STATUS. A FINANCE CHARGE AT A MONTHLY RATE OF 1.50% (18% ANNUALLY) WILL BE ADDED ANY ACCOUNT BALANCE THAT IS OUTSTANDING. THE MINIMUM FINANCE CHARGE IS \$2.00. ALL FINANCE CHARGES INCURED MUST BE PAID TO BRING THE ACCOUNT TO A CURRENT STATUS.

ANY ACCOUNT THAT IS PAST NINETY(90) DAYS, INCLUDING FINANCE CHARGES, WILL HAVE THE ACCOUNT PUT ON A "ON HOLD" STATUS UNTIL ALL CHARGES, INCLUDING FINANCE CHARGES, HAVE BEEN PAID IN FULL.

HIGHWAY 55 RENTAL CREDIT APPLICATION

DATE _____ AMOUNT OF CREDIT REQUESTED \$ _____

CUSTOMER(FULL LEGAL NAME OF BUSINESS) _____

DBA _____

STREET ADDRESS _____

CITY _____ STATE _____ COUNTY _____ ZIP _____

PHONE #() _____ FAX #() _____

HOW LONG IN BUSINESS? _____ TYPE OF BUSINESS-PARTNERSHIP _____ CORPORATION _____

YEAR END _____ FEDERAL I.D. # _____ MN RESALE TAX # _____

DO YOU--RENT ___ OWN ___ BUSINESS LOCATION.

NAME AND ADDRESS OF LANDLORD OR MORTGAGE HOLDER _____

SHAREHOLDERS (PLEASE LIST ALL SHAREHOLDERS.)

NAME _____ PHONE #() _____ SS# _____

HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____

NAME _____ PHONE #() _____ SS# _____

HOME ADDRESS _____ CITY _____ SS# _____

PLEASE LIST OTHERS SEPARATELY IF NECESSARY.

DO YOU REQUIRE P.O. NUMBERS? YES ___ NO ___ AUTHORIZED TO RENT LIST? PLEASE ATTACH.

BANK REFERENCES:

1. _____ ADDRESS _____

ACCT. # _____ CONTACT PERSON _____ PHONE #() _____

2. _____ ADDRESS _____

ACCT. # _____ CONTACT PERSON _____ PHONE #() _____

BUSINESS CREDIT REFERENCES: (LOCAL REFERENCES REQUIRED)

1. _____ ADDRESS _____ FAX#() _____

ACCT. # _____ CONTACT PERSON _____ PHONE #() _____

2. _____ ADDRESS _____ FAX#() _____

ACCT. # _____ CONTACT PERSON _____ PHONE #() _____

3. _____ ADDRESS _____ FAX#() _____

ACCT. # _____ CONTACT PERSON _____ PHONE #() _____

I, _____, DO HEREBY AUTHORIZE THE RELEASE OF ANY AND ALL CREDIT INFORMATION TO HIGHWAY 55 RENTAL AND SALES FROM THE ABOVE LISTED REFERENCES. I ALSO CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. WHEN THIS APPLICATION FOR CREDIT IS APPROVED AND MY ACCOUNT IS OPENED I AGREE TO ABIDE BY ALL HIGHWAY 55 RENTAL PAYMENT AND CREDIT TERMS AS DESCRIBED ON THE ATTACHED FORM.

A FINANCE CHARGE AT A MONTHLY RATE OF 1.50% (18.0% ANNUALLY) WILL BE ADDED TO ANY ACCOUNT BALANCE THAT IS OUTSTANDING 31 DAYS OR MORE AFTER THE INVOICE DATE. THE MINIMUM FINANCE CHARGE IS \$2.00.

APPLICANT'S SIGNATURE _____

MAIL OR FAX COMPLETED APPLICATION TO:
HIGHWAY 55 RENTALS
225 HWY 55
HAMEL, MN 55340
PHONE: (763) 478-6448 FAX (763) 478-2937