



1-206-841-0235
825 Valentine Ave E, Pacific WA
info@newwayleasingandrentals.com

CREDIT APPLICATION

Name: _____ Phone: _____

Fax: _____

Billing: _____ City: _____ State: _____ Zip: _____

Shipping: _____ City: _____ State: _____ Zip: _____

Years in Business: _____ Do You Require a PO#? Yes: _____ No: _____ Taxable _____ Tax Exempt _____
(Must enclose exemption form)

Type of Business: _____ Request for: Service _____ Parts _____

Corporation: _____ Proprietorship: _____ Partnership: _____ Other: _____ Credit Line Requested: \$ _____

If Corporation or Partnership, Name of Principals:

1. _____ Title: _____

2. _____ Title: _____

3. _____ Title: _____

Credit and Trade References:

Name

Address

1. _____ Fax: _____

Phone: _____

2. _____ Fax: _____

Phone: _____

3. _____ Fax: _____

Phone: _____

4. _____ Fax: _____

Phone: _____

I verify that all the above information is true and accurate, and understand that false information furnished is an automatic disqualification.

Terms: Net 10th. 1 1/2% service charge, annual percentage of 18% will be applied to all past due invoices.

I agree to pay according to the invoice terms.

BY: _____
Signature

Date

Title