



ELSINORE VALLEY RENTALS, INC.

Accounts Receivable Credit Application

1. CUSTOMER INFORMATION

Full Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

2. COMPANY INFORMATION

Company Name: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

Phone: _____

Website: _____

Type of Business: _____

Years in Business: _____

EIN (Federal Tax ID): _____

3. TRADE REFERENCES

(Please provide three current vendor references)

Vendor Name	Contact Name	Phone	Email	Account #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. BANKING INFORMATION

Bank Name: _____

Bank Address: _____

Phone: _____

Bank Contact Name: _____

Checking Account #: _____



ELSINORE VALLEY RENTALS, INC.

Accounts Receivable Credit Application

Routing #: _____

5. CREDIT CARD INFORMATION

(To be used for backup or pre-authorization purposes only)

Cardholder Name: _____

Card Type: ☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover

Card Number: _____

Expiration Date: _____ CVV: _____

Billing Zip Code: _____

Authorization: I hereby authorize Elsinore Valley Rentals, Inc. to use this credit card for payment if required due to non-payment or per our credit terms agreement.

Signature: _____ Date: _____

6. TERMS & CONDITIONS

I certify that the information above is true and correct. I authorize Elsinore Valley Rentals, Inc. to make inquiries into the banking and business/trade references listed above. I agree to pay all invoices within the agreed-upon terms, Net 30, and understand that late payments may result in:

- A \$50 late fee
- Finance charges of 18% annually (1.5% monthly)
- Revocation of credit privileges

Authorized Signature: _____

Name & Title (Printed): _____

Date: _____