



# CREDIT APPLICATION

**Corporate Office**  
P.O. Box 1344  
8 48<sup>th</sup> Ave W  
Williston, ND 58802  
Ph. 701-572-6301

**Accounts Receivable Contact**  
Michelle Kolrud  
Phone: 701-282-7263  
Fax: 701-373-0009  
Email: ar@borsheimcrane.com

**Billing Address:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # (Office): \_\_\_\_\_ Fax: \_\_\_\_\_  
Website: \_\_\_\_\_

**Shipping Address if different:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # (Office): \_\_\_\_\_ Phone # (other) \_\_\_\_\_

**Name of Company Officers:**

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Cell # \_\_\_\_\_  
Name: \_\_\_\_\_ Position: \_\_\_\_\_ Cell # \_\_\_\_\_  
Name: \_\_\_\_\_ Position: \_\_\_\_\_ Cell # \_\_\_\_\_

**Company Information**

Date Business Started: \_\_\_\_\_  
Description of Business \_\_\_\_\_  
Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ Other \_\_\_\_\_  
Federal Tax ID # \_\_\_\_\_ DUNS Number \_\_\_\_\_  
Bank Name \_\_\_\_\_  
Bank Officer or Contact: \_\_\_\_\_ Phone # \_\_\_\_\_



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Account # \_\_\_\_\_

Do you require Purchase Orders? Yes \_\_\_\_\_ No \_\_\_\_\_ Are purchases tax exempt? Yes \_\_\_\_\_ No \_\_\_\_\_

Tax Exempt # \_\_\_\_\_

Sales Tax Exempt # \_\_\_\_\_

(If exempt send copies of tax exempt certificates)

Requested Credit \$ \_\_\_\_\_

**Accounts Payable Contact:**

Name \_\_\_\_\_ Position \_\_\_\_\_

Phone \_\_\_\_\_ Ext. \_\_\_\_\_

Email \_\_\_\_\_

Special Billing Instructions \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Trade References:**

1. Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Contact \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

2. Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Contact \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

3. Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Contact \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

4. Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Contact \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_



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## Credit Terms:

- All invoices are to be paid within 30 days of the date of the invoice.
- Invoices unpaid at the expiration of 30 days from the date of the invoices will begin to accrue late payment service charges at the rate of 1.5% per month, beginning on the 31<sup>st</sup> day from the date of the invoice.
- Claims arising from the invoice must be presented to Borsheim Builders Supply, Inc. dba: Borsheim Crane Service in writing within 15 days from the date of the invoice.

## Agreement:

- The applicant certifies that the information contained herein is complete and accurate and understands that it is to be used to determine the amount and conditions of the credit to be extended.
- The applicant consents to the obtaining of credit and/or other information to be used at any time in connection to the account hereby applied for, and consents to and authorizes the release of any credit and financial information by any bank, trade reference, mortgage holder or landlord, and credit reporting agencies, and expressly consents to Borsheim Builders Supply, Inc. obtaining a consumer credit report of the undersigned, and a business credit report of the applicant for the purposes of evaluating credit worthiness.
- Applicant further expressly agrees that it shall be liable and pay all attorneys' fees, collection costs and court fees, and any other expenses, whether or not incurred in connection with litigation, including but not limited to attorneys' fees and costs associated with the enforcement of any of the terms of this application and attorneys' fees and costs resulting from a default under this application.
- Borsheim Builders Supply, Inc. reserves its right, at its sole discretion and without notice, to cancel all available credit and refuse to make future advances.
- The applicant further agrees to notify Borsheim Builders Supply, Inc. of any changes in officers, ownership and/or financial status.

The Undersigned has read and accepted the above credit terms and conditions. The undersigned warrants that the information given in this credit application is true and no unfavorable information has been omitted. Furthermore the undersigned is a duly authorized officer or representative of the company with the authority to sign this application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

