

APPLICATION FOR COMMERCIAL CREDIT



RECO Equipment, Inc. dba
Bobcat[®]
 of Pittsburgh

CRANBERRY TWP. BRANCH, 20620 Route 19 North, Cranberry Township, PA 16066, Phone: 724-779-4600, Fax: 724-779-4610
 MEADOWLANDS BRANCH, 250 Country Club Rd., Meadowlands, PA 15347, Phone: 724-222-4061, Fax: 724-222-8323
 MT. PLEASANT BRANCH, 210 Eastview Drive, Mt. Pleasant, PA 15666, Phone: 724-696-4555, Fax: 724-696-4450
 BOBCAT OF INDIANA COUNTY, 2279 Warren Road, Indiana, PA 15701, Phone: 724-471-2278, Fax: 724-801-8373
 BOBCAT OF ERIE, 9 Circuit Road, Waterford, PA 16441, Phone: 814-796-0040, Fax: 814-796-8300

EMAIL APPLICATION TO: ar@recoequip.com / Fax: 740-363-8061

Company

Name of Business				Tax I.D. Number	
Address:				Phone:	
				Email:	
City:		State:		ZIP:	
				County:	
Type of Business:			In Business Since:		
Legal Form Under Which Business Operates:					
Corporation <input type="checkbox"/>		Partnership <input type="checkbox"/>		Proprietorship <input type="checkbox"/>	
If Division/Subsidiary, Name of Parent Company:				In Business Since:	
Name of Company Principal Responsible for Business Transactions:				Title:	
Address:		City:		State:	
				ZIP:	
				Phone:	
Taxable: <input type="checkbox"/> Yes. If exempt, please include tax exempt certificate. <input type="checkbox"/> No Tax will be charged until an exempt certificate is on file					

Financial Information

Bank Name:		Phone No:	
Checking Account #:		Contact Name	
Address:			
Insurance Co :		Phone No:	
Agents Name:			

Trade References (Please NO Oil Companies, Utilities or Credit Card Companies)

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Phone:	Phone:	Phone:
Fax:	Fax:	Fax:

Officers / Owners

Name-Title:	Name-Title:	Name-Title:
Address:	Address:	Address:
Phone:	Phone:	Phone:
Soc Security No:	Soc Security No:	Soc Security No:

All invoices are due and payable according to the invoice terms. Interest will be charged on all invoices not paid by the 30th day after the invoice is due and payable, at the rate of eighteen percent (18%) per annum, or the maximum rate permitted by the state or federal law, whichever is greater. It is expressly agreed that all obligation of the parties created herein are performable in the count of Belmont, in the state of Ohio, the Main Office of RECO equipment, Inc. and the laws of the state of Ohio shall govern all transactions. Suit may be brought in Belmont County, Ohio. A failure to pay requiring suit shall entitle RECO Equipment, Inc. to the costs of suit, including it attorney's fees incurred in the collection. RECO Equipment, Inc. is authorized to investigate and obtain reports regarding this application or resulting account with credit reporting agencies and others, including personal guarantors. By signing below, signer confirms he is authorized to sign on behalf of the company.

 Agreed to By (Company Name)

 Date

 Authorized Signature

 Title

**NOTICE: THIS APPLICATION MUST BE COMPLETED IN FULL IN ORDER TO OBTAIN AN OPEN ACCOUNT
 ACCOUNTS RECEIVABLE: Phone: 740-782-1314**