

PRIME TO GO Credit Application FAX: (215) 750-9962

Credit Approved (Yes) (No)

NOTE: Until credit has been approved, all work will be C.O.D.

Company Name _____ Phone _____
Parent Company, If Subsidiary _____
Address _____
Year Established _____ Corp. _____ Partnership _____ Proprietorship _____
Type of production: Broadcast _____ Commercial, Cable, Industrial, Educational, Govt., Other _____

To be completed by individuals, Partnerships, or Proprietorships

Social Sec. No. - - - - - DL# _____ State _____
Employer's Name _____ Position Held _____
Employer's Address: _____

To be completed by corporations:

Name of President: _____
Address & Phone: _____
Name of Vice President: _____
Address & Phone: _____
Name of Treasurer: _____
Address & Phone: _____
Incorporated under laws of what state?: _____
Year Incorporated?: _____

To be completed by all applicants:

Please list any judgments or legal proceedings pending or suits threatened against the applicant or its principals. If none state "None"
Have you ever filed for bankruptcy? _____ Disposition _____
Do you pledge or borrow on your receivables? _____ From whom? _____
Do you use purchase orders? _____ Authorized names _____
(all changes must be in writing)

Vendor references in this industry:

Fill out the 3 enclosed credit slips and fax back to Prime To Go (610) 750-9962.

Bank Reference:

Fill out and sign bank information slip, and then fax directly to your bank.

Insurance Information:

We require a certificate of insurance listing Prime To Go as loss payee A.I.M.A.

Broker: _____ Contact: _____ Telephone: _____
Address: _____
Type of Insurance: _____ Amount applying to rented equipment: \$ _____

In consideration of the extension of credit terms, the undersigned severally and/or collectively do personally guarantee the payment of all charges made by and/or on behalf of the applicants, plus attorney fees, court and all other costs of collection should collection proceedings become necessary. This application is accepted and credit extended to customer on the basis of representations by customer and agreements herein.

A new credit application must be signed and approved every 12 months.

Print Name: _____

Signed by: _____

Title: _____

Tax Exempt

Resale #

Please include tax certificate

PRIME TO GO Bank Reference Form

Please complete the top portion of this form **then forward to your banking institution.**
Have them fill in the appropriate information and fax the form directly to PRIME TO GO.

To Be Completed by Customer

Company Name: _____

Phone #: _____

Address: _____

City _____

State _____

ZIP Code _____

Bank Name _____ Phone # _____

Contact Name _____ Fax # _____

Bank Account # _____

I (We) understand that this Bank Reference Form is being submitted for the purpose of establishing an account with PRIME TO GO and hereby authorize the release of the confidential information outlined below.

Signature and Title _____

Print Name: _____ Date _____

To be completed by Bank

Date Account Opened _____ Average Balance _____

Any NSF Checks? () YES () NO

Borrowing? () YES () NO If yes, Type _____ Amount Owing _____

Is the Above named individual a signature on the account? () YES () NO

Signature & Title _____ Date _____

Bank: Please return by fax to 215-750-9962 Attn: Justin

PRIME TO GO Vendor Reference #1

Date: _____

Please deliver this request to:

Name / Department: _____

Company: _____

Fax # : _____ Telephone # : _____

From: Justin Menzel at Prime To Go (888) 858-4180

The Company listed below is applying for credit with PRIME TO GO and has given your Company as a credit reference. We would appreciate your prompt response.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____

Length of time doing business _____ Credit Limit (if any) _____

Current Balance _____ Amount Past Due _____

Your Terms _____ Pays within terms _____

Highest credit extended _____

Comments _____

Please return by fax to 215-750-9962 Attn: Justin

PRIME TO GO Vendor Reference #2

Date: _____

Please deliver this request to:

Name / Department: _____

Company: _____

Fax # : _____ Telephone # : _____

From: Justin Menzel at Prime To Go (888) 858-4180

The Company listed below is applying for credit with PRIME TO GO and has given your Company as a credit reference. We would appreciate your prompt response.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____

Length of time doing business _____ Credit Limit (if any) _____

Current Balance _____ Amount Past Due _____

Your Terms _____ Pays within terms _____

Highest credit extended _____

Comments _____

Please return by fax to 215-750-9962 Attn: Justin

PRIME TO GO Vendor Reference #3

Date: _____

Please deliver this request to:

Name / Department: _____

Company: _____

Fax # : _____ Telephone # : _____

From: Justin Menzel at Prime To Go (888) 858-4180

The Company listed below is applying for credit with PRIME TO GO and has given your Company as a credit reference. We would appreciate your prompt response.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____

Length of time doing business _____ Credit Limit (if any) _____

Current Balance _____ Amount Past Due _____

Your Terms _____ Pays within terms _____

Highest credit extended _____

Comments _____

Please return by fax to 215-750-9962 Attn: Justin