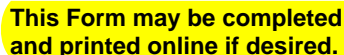


VALLEY RENTAL CENTERS, INC.

Dean Price, Mgr.

Ph. 828-758-7400

Fax 828-758-0121

Physical Address:	City	State	Zip
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Mailing Address: _____ **City** _____ **State** _____ **Zip** _____

Home/Office Phone()_____ - _____ Fax()_____ - _____ Jobsite Phone()_____ - _____ Mobile()_____ - _____

What do you require on invoices?_____

Who is authorized to make purchases?_____

PRINCIPLE PARTNER or PROPRIETOR (Please Print) _____

Email Address(s) _____

1. **Name:**_____

Address:

Telephone # _____

Fax # _____

2. **Name:**_____

Address:

Telephone # _____

Fax # _____

3. **Name:**_____

Address:

Telephone #_____

Fax #

Bank: _____ Account # _____ City: _____ State: _____ Zip: _____

Bank Officer's Name: _____ Telephone # _____

APPLICANT'S SIGNATURE ATTESTS ACCEPTANCE OF AGREEMENT, FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH FOLLOWING TERM AND CONDITIONS:

Terms: Net 10th All invoices billed by the 25th of a month are due by the 10th of the following month. Past due charges(1.5% per month \$2.00 Min.) are assessed on the 26th for unpaid invoices from the previous month. Invoices are given to your personnel at time of purchase or return of equipment. A second copy is also mailed to the customer's office. **RENTAL PAYMENTS SHOULD BE FROM "FINAL" CONTRACT AND NOT FROM "OPEN CONTRACTS" OR "RESERVATIONS"**. For customer convenience, statements are mailed on the 26th of the month. If invoices and related past due charges are not paid by the 25th following the second statement, credit may be suspended. By the signature below the applicant acknowledges and accepts these terms for this business.

Date: _____

Proprietor or Partner

Spouse or Partner

Partner

Partner

NOTICE: IN THE EVENT THIS ACCOUNT BECOMES DELINQUENT, ALL WRITTEN AND VERBAL COMMUNICATIONS WILL BE AN ATTEMPT TO COLLECT THE DEBT AND ANY INFORMATION WILL BE USED FOR THAT PURPOSE.