

WINCHESTER EQUIPMENT CO.
 MAIN OFFICE: 121 INDIAN HOLLOW RD.
 WINCHESTER, VA 22603-3938
 Telephone: (540) 667-2244, (800) 323-3581
 Fax: (540) 665-3058

CREDIT ACCOUNT APPLICATION
 (Please Print or Type)

BUSINESS CONSUMER

Telephone No: _____
 Fax No: _____
 Cell No: _____
 Website: _____
 E-Mail: _____

Date: _____

Legal Name of Firm or Person: _____

BOBCAT OF NORTHERN VIRGINIA
 13125 ARTO ST.
 BRISTOW, VA 20136-1151
 Telephone: (703) 754-3300
 Fax: (703) 754-4400

Partnership Sole Proprietorship Corporation LLC No. of Years in Business _____

Address: _____ City: _____ State: _____ Zip _____

BOBCAT OF FREDERICK
 7649 HAYWARD ROAD
 FREDERICK, MD 21702
 Telephone: (301) 378-0491
 Fax: (301) 378-0537

Tax Federal I.D. No. _____ or Social Security No. _____

PRINCIPAL MEMBERS OF FIRM:

Name: _____	Title: _____	DUNS # _____
Name: _____	Title: _____	Res. Phone _____
Name: _____	Title: _____	Res. Phone _____

BOBCAT OF TIDEWATER
 986 BELLMORE AVENUE
 NORFOLK, VA 23504-4103
 Telephone: (757)625-4766, Fax: (757) 625-6709

BANK REFERENCE:

Name: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip _____

Account Officer: _____
 Checking Account No. _____
 Loan Account No. _____
 Revolving Account No. _____

WE MAKE APPLICATION FOR CREDIT ON
 AN OPEN ACCOUNT WITH YOUR FIRM
 BASED ON THE FOLLOWING TERMS:

TERMS: PAYMENT IS DUE WITHIN 30
 DAYS FOLLOWING DATE OF PURCHASE.
 No finance charge is made on accounts paid within
 30 days of purchase. Accounts not paid within 30
 days will be charged 1.5% each month or a
 minimum charge of 50 cents for balances under
 \$33.00 which is an annual percentage rate of 18%.

OPEN ACCOUNT REFERENCES: (TRADE REFERENCES)

	Name of Credit Reference	City, State	Fax No.	Telephone No.	Account No.
1					
2					
3					

DO NOT WRITE IN THIS BOX	
Date Received _____	
<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
By: _____	Date: _____
REMARKS	
cc: _____	

LIST PERSONS WHO ARE AUTHORIZED TO SIGN:

Name: _____ S.S. No. _____
 Name: _____ S.S. No. _____

IS A PURCHASE ORDER REQ'D?	
YES	<input type="checkbox"/>
NO	<input type="checkbox"/>

WILL PURCHASES BE TAXABLE OR EXEMPT (If exempt, we must have proper exemption certificate on file.)

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history to answer questions about your experience with me. Applicant acknowledges receipt of the equal opportunity notice. Applicant attests a personal guarantee that will assure payment of any amount correctly charged to this account. In the event of non-payment, applicant will pay any and all reasonable legal and collection fees for payment of this account.

Signature of Applicant: _____