

TEAM EQUIPMENT Co. / Level Repair

22707 Schoenherr Rd. Warren, MI. 48089

Phone (586) 552-4000

Fax (586) 552-2322

Credit Application

Date: _____

Applicant Information *

Company Name		Contact Name			
Address	City	State	Zip		
Years In Business	Years at Address				
Billing Address (if different from Business Address)	City	State	Zip		
Business Telephone No.	Fax No.	Cell Phone No.			
No. of Employees	E-mail Address/Web Site				
Nature of Business.	Contractor License No.				
Business Structure:	Sole Proprietor	Partnership	LLC	Corporation	
Previous Account With Level Repair.	YES	NO			
Purchase Order No. Required On Each Invoice?:	YES	NO	Any Restrictions On Who Can Order or Sign for Equipment? If "Yes" Attach List of Authorized Employees	YES	NO

Owner/Office Information *

Name	Title	Social Security No./Tax ID No.		
Address				
Home Telephone No.	Driver's License No.	State Issued		
Name	Title	Social Security No./Tax ID No.		
Address				
Home Telephone No.	Driver's License No.	State Issues		

Bank Account Information *

Name	address	Account No.	Account Contact	Telephone No.
Name	address	Account No.	Account Contact	Telephone No.

Credit References *

Name	address	Account No.	Account Contact	Telephone No.
Name	address	Account No.	Account Contact	Telephone No.
Name	address	Account No.	Account Contact	Telephone No.
Name	address	Account No.	Account Contact	Telephone No.

Credit Manager

Date Approved

REVERSE OF APPLICATION MUST BE COMPLETED AND SIGNED BEFORE RETURNING TO LEVEL REPAIR