



CCS Equipment Sales, LLC
 5428 NC Hwy. 96 W.
 Youngsville, NC 27596
 (919) 556-9110

Business Credit Application

*Required Field

Return to Gail Forsyth via email – gforsyth@ccsequipment.com

CONTACT INFORMATION			
YOUR NAME *		TITLE *	
EMAIL *		PHONE *	
BUSINESS INFORMATION AS REGISTERED			
COMPANY NAME *			
ADDRESS *		PHONE *	
CITY *	STATE *	ZIP CODE *	
LENGTH OF TIME AT CURRENT ADDRESS: * _____ YEARS _____ MONTHS			
TYPE OF BUSINESS: SOLE PROPRIETORSHIP PARTNERSHIP LLC CORPORATION OTHER			

BANK INFORMATION		
BANK NAME *		CONTACT NAME *
ADDRESS *		PHONE *
CITY *	STATE *	ZIP CODE *

BUSINESS REFERENCES		
Please provide us at least three other companies your business has established credit with previously		
1 COMPANY *		CONTACT NAME *
PHONE *		EMAIL *
ADDRESS *		TITLE
CITY *	STATE *	ZIP CODE *

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1 COMPANY *		CONTACT NAME *	
PHONE *		EMAIL *	
ADDRESS *		TITLE	
CITY *	STATE *	ZIP CODE *	

1 COMPANY *		CONTACT NAME *	
PHONE *		EMAIL *	
ADDRESS *		TITLE	
CITY *	STATE *	ZIP CODE *	

CREDIT AGREEMENT
<p> 1 All invoices must be paid within 30 days of the date issued 2 You authorize inquiry into the banking and business references provided within this application 3 3% Convenience Fee is applied to all credit card transactions 4 No Finance, or late charge is made on accounts paid within the statement period 5 Interest rate of 18% per annum will be assessed upon all invoices unpaid on their second monthly statement with a minimum charge of \$1.00 </p>

COMPANY REPRESENTATIVE	
1 SIGNATURE *	TITLE *
NAME *	DATE *