



Refrigerated Trailers and  
Containers for Transport  
and Storage  
**888-585-3565**

## CREDIT APPLICATION

Please fax completed application to (323) 582-5835

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### PLEASE SELECT THE LOCATION(S) THAT YOU WILL REQUIRE SERVICE FROM:

**Los Angeles**

6118 Alcoa Ave.  
Vernon, CA 90058  
(323) 585-1271

**Fontana**

14080 Valley Blvd  
Fontana, CA 92335  
(909) 350-1010

**San Diego**

5410 East Gate Mall  
San Diego, CA 92121  
(858) 452-7690

**Sparks**

1455 Glendale Ave  
Sparks, NV 89431  
(775) 323-5333

**Las Vegas**

3451 Losee Rd.  
Las Vegas, NV 89030  
(702) 649-0077

**San Leandro**

1470 Doolittle Dr.  
San Leandro, CA 94577  
(510) 562-0651

**Stockton**

2055 E. Anderson St.  
Stockton, CA 95205  
(209) 933-9212

**Sacramento**

3970 Commerce Dr.  
W. Sacramento, CA 95691  
(916) 372-0862

**Phoenix**

710 South 67th Ave  
Phoenix, AZ 85043  
888-585-3565

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**In order to establish an open account with SONSRAY RENTAL AND LEASING, INC.,  
we must have the following information. Please ensure all questions are answered to avoid delays.**

Company Legal Name \_\_\_\_\_ D.B.A. \_\_\_\_\_

Telephone # : \_\_\_\_\_ Fax # : \_\_\_\_\_

Billing Address \_\_\_\_\_ Shipping Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of Business:

Years in Business: \_\_\_\_\_ Years at Present Location: \_\_\_\_\_

Resale Number: \_\_\_\_\_ Dun & Bradstreet Number: \_\_\_\_\_  
(Please attach a signed resale card)

Corporation Partnership Sole Proprietorship LLC

### Principals of the Company:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Has credit previously been extended by SONSRAY RENTAL AND LEASING, INC. to this establishment under another name?

Yes No

If so, what name?

Expected credit limit\$ \_\_\_\_\_ Number of trucks/trailers with reefer units \_\_\_\_\_

Is a purchase order required?: Yes No

Person who will authorize purchases or repairs:

Accts Payable Contact Information

Name	Address		
City	State	Zip	
Email	Phone#	Fax #	

Trade References: *(Please furnish 4 COMPLETE addresses)*

Name	Address		
City	State	Zip	
Email	Phone#	Fax #	

Name	Address		
City	State	Zip	
Email	Phone#	Fax #	

Name	Address		
City	State	Zip	
Email	Phone#	Fax #	

Name	Address		
City	State	Zip	
Email	Phone#	Fax #	

Bank References *(Please furnish complete address and account number)*

Bank	Account#		
Address	City	State	Zip
Contact	Phone#	Fax #	

Bank	Account#		
Address	City	State	Zip
Contact	Phone#	Fax #	

Because of the additional expense to us in handling delinquent accounts, a service charge of 1-1/2% per month (18% per annum) will be charged on past due accounts. Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with the terms of sale. The above information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize the firm to whom this application is made to investigate the references listed pertaining to my/our credit and financial responsibility. I/We agree to be responsible for all debts, collection, attorney fees and finance charges incurred by SONSRAY RENTAL AND LEASING, INC.

Signature

Date

Print Name

### If applicable

BOE-230 (7-02)  
GENERAL RESALE CERTIFICATE

### California Resale Certificate

STATE OF CALIFORNIA  
BOARD OF EQUALIZATION

**I HEREBY CERTIFY:**

1. I hold valid seller's permit number:
2. I am engaged in the business of selling the following type of tangible personal property:
3. This certificate is for the purchase from \_\_\_\_\_ of the item(s) I have listed in paragraph 5 below.
4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.
5. Description of property to be purchased for resale:
6. I have read and understand the following:

**For Your Information:**

*A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.*

**NAME OF PURCHASER**

**Signature Of Purchaser,  
Purchaser's Employee Or  
Authorized Representative**

**Date**

**Printed Name Of Person Signing**

**Title**

**Address Of Purchaser**

**City**

**State**

**Zip**

**Telephone Number**