

6118 Alcoa Avenue, Los Angeles, CA 90058 13990 Valley Boulevard, Fontana, CA 92335 5410 Eastgate Mall, San Diego, CA 92121 2055 East Anderson Street, Stockton, CA 95205 2161 Adams Avenue, San Leandro, CA 94577 1751 Bell Avenue, Sacramento, CA 95838 300 E Delhi Avenue, North Las Vegas, NV 89032 1455 Glendale Avenue, Sparks, NV 89431 710 South 67th Avenue, Phoenix, AZ 85043

Please select the location(s) that you will require service from:

Los Angeles	San Diego	Sacramento	Stockton
Fontana	San Leandro	Las Vegas	Reno

CREDIT APPLICATION

Please email completed application to info@sonsrayrentalandleasing.com, or fax (323)582-5835

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	St	Zip	City		St	Zip
Type of Business:						
Years in Business:			Years at Present Loca	ation:		
Resale Number:		Dun & Bradstreet Number:				
	(Please attach a si	gned resale	card)			
Corporation	Partnership	So	le Proprietorship	LLC		
Principals of the Con	npany:					
Name:			Title:			
Name:			Title:			
Has credit previously establishment under ar		2		L AND LEA	ASING, INC.	to this
Expected credit limit\$						
NT 1 C/ 1 // 1	·41 C	• ,				

Number of trucks/trailers with reefer units:

*Is a purchase order required?

*Person who will authorize purchases or repairs:

Accounts Payable Contact Info.

Name	Address			
City	St	Zip	Phone	
Email		Fax		

*Trade References: (Please furnish 4 complete addresses)

Name	Addres	5S	
City	St	Zip	Phone
Email		Fax	
Name	Addres	SS	
City	St	Zip	Phone
Email		Fax	
Name	Addres	58	
Name City	Addres St	ss Zip	Phone
			Phone
City		Zip Fax	Phone
City Email	St	Zip Fax	Phone

Bank References (*Please furnish complete addresses and Account numbers*)

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

Click button to email form.

Or send manually to: info@sonsrayrentalandleasing.com

*If applicable

BOE-23- (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	of tangible personal property:	
3. This certificate is for the purchase from	of the item(s) I have Vendors Name)	listed in paragraph 5 below.
4. I will resell the item(s) listed in paragraph 5, which I am pur- course of my business operations, and I will do so prior to ma sale in the regular course of my business. I understand that if will owe use tax based on each item's purchase price or as oth	king any use of the item(s) other than demonstration a I use the item(s) purchased under this certificate in any	and display while holding the item(s) for
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 misdemeat purchase that he or she will not resell the purchase item prior he or she furnishes a resale certificate to avoid payment to the gain or to evade the payment of tax is liable, for each purchase whichever is more.	r to any use (other than retention, demonstration, or di e seller of an amount as tax. Additionally, a person mis	splay while holding it for resale) and using a resale certificate for personal
NAME OF PURCHASER		
SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZE	D REPRESENTATIVE	
PRINTED NAME OF PERSON SIGNING	TITLE	
ADDRESS OF PURCHASER		
TELEPHONE	DATE	