

**ALL-LIFT WHOLESALE, INC.**  
**(661) 706-4920, (661) 706-4921**  
**FAX (661) 663-0335**

**CREDIT APPLICATION / EQUIPMENT FINANCING**

COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ CELL \_\_\_\_\_

TYPE OF OWNERSHIP: CORPORATION PARTNERSHIP PROPRIETORSHIP

YEARS IN BUSINESS \_\_\_\_\_

FEDERAL TAX ID# \_\_\_\_\_ RESALE# \_\_\_\_\_

OWNERS NAME/TITLE: \_\_\_\_\_ S/S# \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

OWNERS NAME/TITLE: \_\_\_\_\_ S/S# \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**BANK REFERENCES**

BANK NAME \_\_\_\_\_ PHONE# \_\_\_\_\_ ACCT# \_\_\_\_\_

BANK NAME \_\_\_\_\_ PHONE# \_\_\_\_\_ ACCT# \_\_\_\_\_

**TRADE REFERENCES**

NAME: \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

SIGNATURE & AUTHORIZATION TO RELEASE INFORMATION X \_\_\_\_\_

DATE: \_\_\_\_\_