



EXPRESS STORAGE CONTAINER RENTAL AND SALES CO. - CREDIT APPLICATION

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BUSINESS CONTACT INFORMATION

Contact Person and Title:

Company Name:

Phone: () - Fax: () - Email:

Registered Company Address:

City: State: Zip Code:

Date Business Commenced:

Sole Proprietorship ☐ Partnership ☐ Corporation ☐ Other ☐

BUSINESS AND CREDIT INFORMATION

Primary business address:

City: State: Zip Code:

How long at current address?

Phone: () - Fax: () - Email:

Bank Name:

Bank Address: Bank Phone:

City: State Zip Code:

Savings ☐ Checking ☐ Other ☐

Account Number:

BUSINESS/TRADE REFERENCES

Company Name:

Address:

City: State: Zip Code:

Phone: () - Fax: () - Email:

Type of Account:

Company Name:

Address:

City: State: Zip Code:

Phone: () - Fax: () - Email:

Type of Account:

Company Name:

Address:

City: State: Zip Code:

Phone: () - Fax: () - Email:

Type of Account:

AUTHORIZED SIGNATURES

TITLE:

DATE:

X

TITLE:

DATE:

X