

CREDIT APPLICATION

PARTY/TENT RENTAL DIVISION
111 PLAN WAY
WARWICK, RI 02886
Telephone: (401) 738-9731 X 1
Fax: (401) 738-3509

BUSINESS NAME _____
ADDRESS _____
CITY _____ STATE: _____ ZIPCODE _____
TELEPHONE# _____ FAX# _____
EMAIL ADDRESS: _____
TYPE OF BUSINESS: _____ NO.OF YEARS IN BUSINESS _____

NAMES AND ADDRESSES OF PARTNERS OR PROPRIETORS

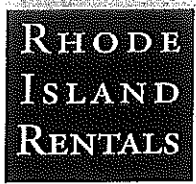
NAME _____
ADDRESS _____
CITY _____ STATE: _____ ZIPCODE _____
NAME _____
ADDRESS _____
CITY _____ STATE: _____ ZIPCODE _____

TRADE REFERENCES

BUSINESS NAME _____
ADDRESS _____
CITY _____ STATE: _____ ZIPCODE _____
ACCOUNT NUMBER _____ TELEPHONE NUMBER _____
FAX NUMBER _____

BUSINESS NAME _____
ADDRESS _____
CITY _____ STATE: _____ ZIPCODE _____
ACCOUNT NUMBER _____ TELEPHONE NUMBER _____
FAX NUMBER _____

BUSINESS NAME _____
ADDRESS _____
CITY _____ STATE: _____ ZIPCODE _____
ACCOUNT NUMBER _____ TELEPHONE NUMBER _____
FAX NUMBER _____



CREDIT APPLICATION CONTINUED

BANK REFERENCES

BANK NAME: _____

ADDRESS: _____

ACCOUNT NUMBER: _____

AFFIDAVIT

By way of this letter, I hereby authorize any and all information to be released to Rhode Island Rentals as part of my application for credit.

Signature _____

Date _____

Printed Name: _____

PERSONAL GUARANTY

IN THE EVENT THAT RHODE ISLAND RENTALS EXTENDS CREDIT TO _____ THEN IN CONSIDERATION THEREOF, THE UNDERSIGNED AGREES TO PERSONALLY GUARANTEE PAYMENT FOR ALL GOODS AND SERVICES SOLD BY RHODE ISLAND RENTALS TO THE SAID COMPANY, ITS SUCCESSORS AND ASSIGNS, UNDER THE SAME TERMS AND CONDITIONS OF THE ACCOUNT WHICH APPLY TO THE COMPANY.

Signature _____ Date _____

Printed Name _____

Witness _____ Date _____

Printed Name _____

I, the undersigned, certify that the information given in the application is true and complete to the best of my knowledge.