

# UTILITOUGH

## CREDIT APPLICATION

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Trade Name: \_\_\_\_\_

Trade Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

This Location is: Main office: \_\_\_\_\_ Branch office: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### IS YOUR COMPANY A: (YES / NO):

Corporation: \_\_\_\_\_

Proprietorship: \_\_\_\_\_

Individual: \_\_\_\_\_

Other: \_\_\_\_\_ Please specify: \_\_\_\_\_

No. Years Established: \_\_\_\_\_

Federal ID: \_\_\_\_\_

Duns #: \_\_\_\_\_

Credit Line Desired: \_\_\_\_\_

Annual Revenue: \_\_\_\_\_

### PREVIOUS ADDRESS IF LESS THAN 5 YEARS AT ABOVE

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

### BILLING ADDRESS IF DIFFERENT FROM ABOVE:

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

### PARENT OR SUBSIDIARY COMPANY, IF APPLICABLE

Affiliation: \_\_\_\_\_

Full Name: \_\_\_\_\_

Trade Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

### BANK INFORMATION:

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

Account #: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone #: \_\_\_\_\_

### IF PROPRIETORSHIP OR PARTERSHIP, LIST OWNERS

Full Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Full Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_



**TRADE REFERENES (Open Accounts Only)**

Name: \_\_\_\_\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 City: \_\_\_\_\_ City: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant’s signature below constitutes consent and agreement to the following terms and conditions:

\_\_\_\_\_ (Applicants Company Name) warrants that all statements on this form are true and correct and are made for the purpose of obtaining credit from UtiliTough, Inc. (The Company). Applicant authorizes the company to request credit information from the references herein listed of from other sources pertaining to Applicant’s financial responsibility. Applicant agrees to make payment within the specified terms of the invoice. Applicant further agrees to pay late payment penalty of 1.5% on any unpaid balance due. If applicant utilizes an agency or other third party in its dealings The Company. Applicant and the agency or third party shall be jointly and severely liable for the payment of all materials, product or services shall be jointly and severely liable for the payment of all materials, product or services provided to the Applicant. The Applicant agrees to indemnify The Company for all expenses incurred in connection with the collection of amounts payable, including court costs and attorney’s fees and any other fees associated with collection of the debt. Signature is authorized by The Company to enter into contracts and sign this agreement.

Signature of Applicant: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_ Title or Position: \_\_\_\_\_



PERSONAL GUARANTEE

UtiliTough, Inc.

In order to induce The Company to extend credit to Applicant for payment of materials, product or services by Applicant or its authorized Agent and all liabilities of Applicant hereunder, the undersigned ("Guarantor") hereby fully and unconditionally guarantees the prompt payment of any sums owed to The Company for such services, materials, or products. Guarantor waives all rules of law whatsoever legally permitted to be waived which would, if not waived, impair the enforcement of release hereof. Guarantor further agrees to pay a late payment penalty of 1.5% per month on any balance dues. Guarantor agrees to indemnify The Company for all expenses incurred in connection with the collection of amounts payable, including court costs and attorney's fees or any other fees associated with collection of the debt.

This guarantee shall continue in force until written notice to become effective not less than 7 days following the receipt, sent by certified mail, return receipt requested, or facsimile, is received by the Credit Manager of UtiliTough, Inc. at PO Box 96, Silverstreet, SC 29145 803.590.6890.

Guarantor \_\_\_\_\_ Date \_\_\_\_\_
Address \_\_\_\_\_ Phone Number \_\_\_\_\_
City, State, Zip \_\_\_\_\_ Birthdate \_\_\_\_\_

What lines of UtiliTough equipment are you interested in (Yes / No)?

Kanga mini skid steer loaders and attachments: \_\_\_\_\_ Hydraulic Breakers: \_\_\_\_\_
Hydraulic Post Drivers: \_\_\_\_\_ Digga: \_\_\_\_\_ CID Attachments: \_\_\_\_\_
Hyundai Everdigm construction equipment: \_\_\_\_\_ Trailers: \_\_\_\_\_
Truck Ramps: \_\_\_\_\_
Other, please specify: \_\_\_\_\_

What lines of equipment do you currently Stock/sell? \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

# UTILITOUGH

What is your current market mix? residential %: \_\_\_\_\_ commercial %: \_\_\_\_\_ industrial %: \_\_\_\_\_  
landscapers%: \_\_\_\_\_ arborist %: \_\_\_\_\_ agricultural %: \_\_\_\_\_

Are you set up with Kubota industrial engines? \_\_\_\_\_

Are you set up with Honda engines? \_\_\_\_\_

Are you set up with Brigg and Stratton Vanguard Engines? \_\_\_\_\_

How many employees in your company? \_\_\_\_\_

Do you have a parts department? \_\_\_\_\_

How many employees in your parts department? \_\_\_\_\_

Do you have a showroom? \_\_\_\_\_

Showroom Square footage: \_\_\_\_\_

Do you have a repair shop? \_\_\_\_\_

What are your mobile service capabilities?

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What are your in-house service capabilities?

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Is there someone to perform demos? \_\_\_\_\_

What is your primary marketing area (Territory & Region) ? \_\_\_\_\_

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**About Company Sales Team**

Who are your **external** Sales Employees / brands represented, etc.? (Describe by sales rep, brands they are accountable for): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

After hours contact name and telephone for emergency: \_\_\_\_\_

\_\_\_\_\_

Who are your **internal** Sales Employees / brands represented, etc.? (Describe by sales rep, brands they are accountable for): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

After hours contact name and telephone for emergency: \_\_\_\_\_

\_\_\_\_\_

Completed by: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Please submit this credit application, along with your Company's W-9 and sales tax exempt certificate to: [UtiliTough@yahoo.com](mailto:UtiliTough@yahoo.com).