



CUSTOMER INFORMATION FORM

Phone) 951-678-2177 Fax) 951-678-1990 | P.O. Box 669 Wildomar, CA 92595 | www.GoldenOfficeTrailers.com

Company Name _____

Phone _____ Fax _____ Cell _____

Address _____ City _____ State _____ Zip _____

Website _____ Accounts Payable Contact _____

AP Contact Phone _____ Fax _____ Email _____

Division/Subsidiary/Branch of _____

State Organized Under _____ **Date Established** _____ **Federal ID#** _____

if Partnership or Individually Owned/Owner	Social Security#	Owner/Partner	Social Security#
_____	_____	_____	_____

Bank Information

Name _____ Contact _____

Phone _____ Fax _____ Email _____

Checking Account# _____ Loan Account# _____

Insurance Information

Agency Name _____ Agent/Contact _____

Insurer _____ Policy# _____

Phone _____ Fax _____ Email _____

Trade References

1. Company Name _____ Contact _____

Phone _____ Fax _____ Account No. _____

Email _____

2. Company Name _____ Contact _____

Phone _____ Fax _____ Account No. _____

Email _____

3. Company Name _____ Contact _____

Phone _____ Fax _____ Account No. _____

Email _____

4. Company Name _____ Contact _____

Phone _____ Fax _____ Account No. _____

Email _____

Is applicant currently operating in bankruptcy? Yes No

Has applicant ever reorganized under bankruptcy laws? Yes No

Authorization

I hereby authorize Golden Office Trailers, Inc. to verify the above trade references. The information that Golden Office Trailers, Inc. obtains is only to be used in the processing of my order for the lease of a commercial office trailer. I authorize the release of any information concerning credit history, banking information and acknowledge that credit terms are due upon receipt of invoice.

Authorized Signature _____ Date _____

Printed Name/Title _____

Continuing Personal Guaranty

In consideration of credit granted by Golden Office Trailers, Inc. the undersigned guarantees any and all charges now and hereafter and/or money due Golden Office Trailers, Inc. This guaranty includes in addition to any outstanding principal of balance, interest and late charges, and all attorney fees and collection costs. In the event payment is demanded by Golden Office Trailers, Inc. the undersigned agrees to make payment within 30 days.

Signature (Officer or Principal only) Date _____

Printed Name/Title