



Salesman: \_\_\_\_\_

Return via fax to: 225-319-7264

# Credit Application

Company Name \_\_\_\_\_

Trading As \_\_\_\_\_ Web Address \_\_\_\_\_

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

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ -- \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ DUNS # \_\_\_\_\_

Ownership: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_ Other \_\_\_\_\_

Number of years in Business \_\_\_\_\_ Number of years at this Address \_\_\_\_\_ Credit Limit Requested \$ \_\_\_\_\_

Please Note: - A security agreement or personal guarantee may be required.

Federal Tax I. D. or Social Security Number \_\_\_\_\_ Are Purchase Order Numbers Required? \_\_\_\_\_

Nature of your Business? \_\_\_\_\_

List Affiliated Companies \_\_\_\_\_

### **Principal Owners or Officers are:**

Title	Name	Home Address	City / State	Zip	Phone #
Owner/President	_____	_____	_____	_____	_____
Treasurer	_____	_____	_____	_____	_____
Purchasing Agent	_____	_____	_____	_____	_____
Accounts Payable Contact	_____	_____	_____	_____	_____

### **Banking Information:**

Banking Reference \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ -- \_\_\_\_\_

Account # \_\_\_\_\_ Contact Name \_\_\_\_\_

**List Four Suppliers for use as References** (No Leasing, Finance Companies or Subcontractors please)

Name	Address	City / State/Zip	Phone #	Fax #
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____
(4) _____	_____	_____	_____	_____

**Where did you hear about us?** Referral \_\_\_\_\_ Advertisement \_\_\_\_\_ Sales Call \_\_\_\_\_ Trade Show \_\_\_\_\_ Internet \_\_\_\_\_  
Yellow Pages \_\_\_\_\_ Other (Explain) \_\_\_\_\_

The information provided to Better Pumps & Solutions on this application by the applicant(s) and any other information provided to Better Pumps, including financial statements is warranted to be accurate, complete and true. Better Pumps & Solutions is authorized to investigate the applicant's credit and to ask questions about its credit experiences with applicant.

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_



**AGREEMENT**

We agree to standard terms of payment extended to us by BETTER PUMPS & SOLUTIONS, LLC, which will be net 30 days from date of invoice.

We understand and agree to pay BETTER PUMPS & SOLUTIONS, LLC, late charges at the rate of 1-1/2% per month (18% per annum) on any invoice not paid within the above terms. We understand that BETTER PUMPS & SOLUTIONS, LLC, reserves the option of refusing further charges against our open account should the account become past due.

We agree that should it become necessary for BETTER PUMPS & SOLUTIONS, LLC. to pursue legal remedy, we will pay all costs which BETTER PUMPS & SOLUTIONS, LLC., shall incur due to our failure to live up to this agreement.

**INSURANCE:**

We understand that insurance for any equipment rented from BETTER PUMPS & SOLUTIONS, LLC, is OUR responsibility.

We agree to pay to BETTER PUMPS & SOLUTIONS, LLC, within 30 days for any loss which may occur regardless of the nature of such loss, whether insured or not.

We agree at the time of such loss to file the necessary police reports, insurance claims, etc., and to immediately advise BETTER PUMPS & SOLUTIONS, LLC, as to the disposition of the same together with the name of our insurance carrier, address, policy number, etc.

We agree that we are responsible, even though insured, for any amount not paid by our insurance carrier, including but not limited to such things as deductibles, depreciation, or any other amount which might be denied by our insurance carrier up to and including the full value of the equipment.

YOUR initials indicate acceptance and understanding of above insurance paragraph:

INITIALS \_\_\_\_\_

**TAX EXEMPTION:**

We understand that a tax exemption will not be allowed on our account unless BETTER PUMPS & SOLUTIONS, LLC, shall have on file our current and correct certificate for such exemption.

We further agree that any amounts not allowed by the respective state or local governments, shall be paid in full upon notification that said exemption has been disallowed. This shall be without regard as to whether we have previously filed with BETTER PUMPS & SOLUTIONS, LLC., any tax exempt certificate or not.

WE UNDERSTAND ALL OF THE ABOVE TERMS AND CONDITIONS AND AGREE TO COMPLY WITH THE SAME.

SIGNED: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

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

TITLE: \_\_\_\_\_  
**MUST BE SIGNED BY COMPANY OFFICER OR OWNER**

What is needed on the Certificate of Insurance:

- ⇒ Policy for Contractors Equipment or Rented or Leased Equipment
- ⇒ Need to show the Deductible for the equipment policy.
- ⇒ Need to show the Limits for the equipment policy.
- ⇒ Need to show General Liability.
- ⇒ Better Pumps needs to be stated as Additional Insured and Loss Payee.

If possible Certificate of Insurance needs to be on an Accord form.

Our address is:  
1285 Bayou Paul Ln.  
Saint Gabriel, LA 70776  
Phone 225-319-7260  
Fax 225-319-7264



1285 Bayou Paul Ln. Saint Gabriel, LA 70776  
 (225) 319-7260 Fax (225)319-7264

**TERMS AND DEFINITIONS**

**What is a . . .**

- Rental Day**                      One Calendar day not exceeding eight (8) hours running.
- Rental Week**                    Seven (7) calendar days not exceeding 48 hours running.
- Rental Month**                    Twenty-eight (28) calendar days not exceeding 192 hours running.
- Standby Rate**                    The Standby Rate is 75% of the scheduled rate. Standby is for a "second" or additional back-up pump to be run in the event the primary pump cannot. If the standby pump operates for any reason other than failure of a primary BPS Rental pump set, the standard rate will apply.
- Overtime Running**              All scheduled rates are based on an 8 hour per day shift. If equipment is used for a double shift, the 8 hour rate will be multiplied by 1½ times. If used for a triple shift, the rate will be multiplied by 2 times the schedule rate. Diesel units only.

<b>3 - 7 Days</b>	<b>=</b>	<b>1 Week</b>
<b>8 Days</b>	<b>=</b>	<b>1 Week and 1 Day</b>
<b>9 Days</b>	<b>=</b>	<b>1 Week and 2 Days</b>
<b>10 - 14 Days</b>	<b>=</b>	<b>2 Weeks</b>
<b>15 Days</b>	<b>=</b>	<b>2 Weeks and 1 Day</b>
<b>16 Days</b>	<b>=</b>	<b>2 Weeks and 2 Days</b>
<b>17 - 28 Days</b>	<b>=</b>	<b>1 Month</b>

**TERMS AND CONDITIONS**

1. This quotation is valid for 30 days, however, prices may change without written notification.
2. This quotation is our estimate of equipment and material required. Actual installation may vary in cost due to site requirements. Additional equipment or time to set-up will be charged at the above itemized rates or based upon our published rental rate schedule.
3. Our Terms are: Net 30 days to approved credit.
4. Delivery is via BPS Truck unless noted above.
5. No Taxes if any type are included above. Sales Tax will be applied in addition to quoted prices.
6. The customer is responsible to provide an insurance certificate showing Better Pumps & Solutions as an additional insured party for the rental equipment