



Department of Financial Services  
2820 Hamilton Blvd. South Plainfield, NJ 07080  
Tel 908-561-9000 • Fax 908-561-8637

**CREDIT APPLICATION**

DATE   /  /  

**1. COMPANY**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CONTACT \_\_\_\_\_ EMAIL \_\_\_\_\_

PHONE # (\_\_\_\_) \_\_\_\_\_ FAX # (\_\_\_\_) \_\_\_\_\_

CHECK ONE: INDIVIDUAL  PARTNERSHIP  CORPORATION

NUMBER OF YEARS IN BUSINESS \_\_\_\_\_ FEDERAL TAX ID # \_\_\_\_\_

SALES TAX EXEMPT: YES  NO  \*\* IF YES, ATTACH CERTIFICATE

**2. OWNERSHIP**

NAME #1 #2

(LAST, FIRST, MI) \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

SSN # \_\_\_\_\_

TITLE \_\_\_\_\_

EMAIL \_\_\_\_\_

**3. OPEN ACCOUNT**

CREDIT LIMIT REQUESTED \$ \_\_\_\_\_

**4. BANK REFERENCE**

NAME ADDRESS CONTACT PHONE # FAX # ACCOUNT #

1) \_\_\_\_\_

2) \_\_\_\_\_

**5. TRADE REFERENCE**

NAME      ADDRESS      CONTACT      PHONE #      FAX #      ACCOUNT #

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

**6. FINANCIAL REFERENCE**

NAME OF FINANCE COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

**7. WORK ON HAND**

CONTRACT NAME:

1) \_\_\_\_\_

CONTACT \_\_\_\_\_

PHONE # (\_\_\_\_\_) \_\_\_\_\_

CONTRACT NAME:

2) \_\_\_\_\_

CONTACT \_\_\_\_\_

PHONE # (\_\_\_\_\_) \_\_\_\_\_

**8. INSURANCE COMPANY**

AGENT \_\_\_\_\_

PHONE # (\_\_\_\_\_) \_\_\_\_\_

INSURANCE COMPANY \_\_\_\_\_

**9. COMPANY WAIVER**

I hereby authorize Komatsu Northeast to check any of the above named references or credit information agencies.  
I certify that the above statements are accurate.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
AUTHORIZED SIGNATURE

**DO NOT WRITE BELOW THIS LINE**

---

**COMPANY USE ONLY**

SALESMAN \_\_\_\_\_ PSR \_\_\_\_\_ COUNTY CODE \_\_\_\_\_

COMMENTS OR SPECIAL CONDITIONS:

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

**BE SURE TO COMPLETE AND SIGN**

*Authorization To Komatsu Northeast For Use Of The Customer's Credit Card For Delinquent Balances And Guarantee Of All Credit Card Charges.*

The customer: \_\_\_\_\_ hereby authorizes Komatsu Northeast to use the following credit card: Acct #: , Exp Date: Charges to the customer's credit card account include "delinquent" balances, which is hereby defined by balances that have remained unpaid for a period of more than 60 days on accounts for parts, services, machine rentals, interest, carrying charges, and finance charges, and/or for any other items that become due and payable to Komatsu Northeast.

The customer further authorizes Komatsu Northeast to use the above credit card account to cover all future delinquent accounts of the customer to Komatsu Northeast, including indebtedness arising under successive transaction. The customer agrees to hold harmless Komatsu Northeast in its exercise of this authorization agreement. Furthermore, the customer agrees and acknowledges that by virtue of Komatsu Northeast acceptance and/or use of said authorization, there is no obligation assumed by Komatsu Northeast to extend credit to the customer, and that Komatsu Northeast may at any time, without notice and without cause elect to discontinue supplying parts, service, leased machinery, and any other goods or services to the customer. Furthermore, Komatsu Northeast may at its sole discretion elect not to exercise this authorization to use the customer's credit card account in the event a customer's balance becomes delinquent.

This credit card authorization is not intended as an agreement by Komatsu Northeast to extend credit to the customer, nor is it intended to constitute Komatsu Northeast acceptance of credit card payments in lieu of the customer's obligation to make full payment by cash or check. Rather, this authorization is provided by the customer solely as security for assurance of payment of customer balances by cash or check. Komatsu Northeast shall enforce this credit card authorization only in the event the customer's account(s) becomes delinquent.

The undersigned customer hereby agrees to and acknowledges the terms and conditions set forth above, and certifies that he/she is authorized to execute this agreement on behalf of the customer. Furthermore, the undersigned customer guarantees payment of all credit card charges made by Komatsu Northeast in accordance with the terms of this agreement.

\_\_\_\_\_  
DATED

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
PRINT NAME



**Department of Financial Services**  
2820 Hamilton Blvd. South Plainfield, NJ 07080  
Tel 908-561-9000 • Fax 908-561-8637

To induce KOMATSU NORTHEAST (Seller) to give credit to (Customer), now or from time to time, the undersigned, as an interested party, hereby guarantees the prompt payment when due to each and every claim of the Seller and interest at the rate of 1½ % per month on past due invoices.

This is a continuing guarantee of payment and shall remain in force until all outstanding indebtedness is satisfied.

This guarantee shall not apply to any indebtedness created after receipt of written notice that the guarantee has been revoked.

If legal action or a collection agency is required to enforce this guarantee, the Seller shall be entitled to recover collection agency's costs and reasonable attorney fees in addition to other relief granted by the court.

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

GUARANTOR: \_\_\_\_\_

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

SOCIAL SECURITY #: \_\_\_\_\_