



Payment Remit to Address:

PO Box 650396
Dallas, TX 75265-0396

To National Trench Safety, Inc., its subsidiaries and affiliates (collectively, "NTS"): for the purpose of establishing credit with NTS, the undersigned Applicant furnishes the following information. Applicant represents and warrants said information is a true and correct statement of its financial condition.

Branch Name	Salesman Name
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Applicant Information

Legal Company Name		Estimated \$ of Sale or Rental	
Bill to Address	Attn	City	State/Zip
Street Address		City	State/Zip
Telephone No	Fax No	Years in Business	
AP Contact Name	Email	Phone	Fax No
Business Type; (Corp., LP, LLC, Sole Prop.)		Contractor Lic. No / Tax ID	

Owners/Officers

Name	Title	SSN	Drivers License #
Home address		City	State/Zip
Name	Title	SSN	Drivers License #
Home Address		City	State/Zip

Industrial Credit References

Company Name	Telephone No	Fax No
Company Name	Telephone No	Fax No
Company Name	Telephone No	Fax No
Company Name	Telephone No	Fax No

Bank Reference

Bank Name	Account No	
Contact Name	Telephone No	Fax No
Bank Name	Account No	
Contact Name	Telephone No	Fax No

Information

Do you require a purchase order on each invoice?	Select Yes <input type="checkbox"/> or No <input type="checkbox"/>
Do you require a monthly statement?	Select Yes <input type="checkbox"/> or No <input type="checkbox"/>
If exempt for Sales & Use taxes, please include your Tax Exempt Certificate or Direct Pay Permit with your credit application	
Include your Company Certificate of Insurance if renting equipment	
Notes:	

NTS use only: Date	Credit Manager	Account Number	Limit
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Credit Terms

1. Rental Invoices are Due and Payable upon receipt. Sale Invoices are Due and Payable within 30 days of invoice date for credit customers and Due and Payable upon receipt for customers not extended credit.
2. Any account with a delinquent balance may be placed on "credit hold" and any equipment on rent may be picked up without notice.
3. NTS files preliminary notices, pre-liens, and mechanics liens whenever necessary or required by law. This is a Company policy and not a reflection of your credit standing.
4. NTS reserves the right to file UCC1 (Uniform Commercial Code) on sales exceeding \$10k.
5. For each delinquent account, customer agrees to pay a monthly service charge equal to the highest annual percentage rate allowed by law.
6. Customer agrees to pay reasonable attorney fees, collection costs, and court costs incurred by NTS in enforcing these terms and conditions.
7. Customer authorizes NTS to obtain credit reports, and bank references for the purposes of determining the extension or continuation of credit to the Customer.
8. Each Rental and or Sale Agreement, its terms and conditions and other written agreements related thereto are incorporated herein by reference and together with this Application form the entire Agreement.
9. A Loss/Accidental Damage Waiver fee equal to 16% of rental charges will be included on all rental invoices. This fee is not insurance and only covers certain claims for loss or accidental damage to covered equipment that occurs during normal and careful use of the equipment. For more information or to opt out of the Loss/Damage Waiver Plan, contact NTS's credit department at 832-200-0988 or by email at accountsreceivable@ntsafety.com.

Each and all of the covenants, terms, provisions, and agreements herein contained shall be binding upon and inure to the benefit the parties hereto and, to the extent permitted by this Agreement, their respective heirs, legal representatives, successors, and assigns, and/or acquirers, including any entity which acquires, merges with, or obtains control of the Customer. The undersigned warrants that all information is correct, has read, accepted, and agrees to be bound by all of the terms set forth in this document and in each rental contract entered into the by undersigned or his agents. It is understood and agreed that the undersigned specifically consents to NTS investigating the applicant's credit history and may utilize credit reporting services for information on the undersigned. Facsimile copies and electronic signed documents will be treated as originals.

The Federal Equal Credit Opportunity Act/Regulation B prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all of part of the applicant's income derives from any public assistance program; or because the applicant has, in good faith, exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with the law concerning this credit is the Federal Trade Commission, Division of Credit Practices, 6th and Pennsylvania Avenue, NW Washington, D.C. 20580.

Electronic Signature for Credit Terms

For those submitting this credit application via e-mail, type your name on the signature line and check the box beside "I Agree." This is your electronic signature. By doing so you agree that you have reviewed the NTS Credit Application and agree to the information contained herein.

Company officer and title	<input type="checkbox"/> I agree	Date
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CONTINUING Personal Guarantee and Consent to Obtain a Consumer Credit Report

The undersigned individual who is either a principal of the credit applicant or the sole proprietor of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by NTS from time to time as may be needed, in the credit evaluation process. Each and all the covenants, terms, provisions, and agreements herein contained shall be binding upon and inure to the benefit of the parties hereto and, to the extent permitted by this Agreement, their respective heirs, legal representatives, successors and assigns, and/or acquirers, including any entity which acquires, merges with, or obtains control of the Company.

The undersigned hereby unconditionally guarantee(s) the full and prompt payment to NTS when due all indebtedness, obligations, and liabilities of the Customer named in the credit application and its successors and assigns, including all amounts now owing and arising in the future, and including any interest, attorney fees, and collection and court costs. The undersigned agrees to be personally bound by all terms of this credit application. This guarantee shall continue in force until notice in writing sent by certified mail, returned receipt requested, is received by NTS. This notice shall specify the date of termination, not to be less than seven (7) days after the notice and shall not affect any charges for transactions with the Customer that were entered into prior to the termination date.

Electronic Signature for the Continuing Personal Guarantee and Consent to Obtain a Consumer Credit Report

For those submitting this credit application via e-mail, type your name on the signature line and check the box beside "I Agree." This is your electronic signature. By doing so, you agree that you have reviewed the Continuing Personal Guarantee and Consent to Obtain a Consumer Credit Report of this credit application and agree to the information contained herein.

Signature of applicant	Printed Name	<input type="checkbox"/> I agree	Date
Name of Witness	Printed Name	<input type="checkbox"/> I agree	Date



**Customer name &
Number**

**Estimated Monthly
Rental Amount**

**Project Name &
Number**

**Project Start & End
Dates**

Project Address

Customer Tier:

General

Sub-contractor

3rd Tier Sub-contractor

Job Type:

Private

Public

Federal

Residential

Property Owner

Address

Contact Person

Phone/E-mail

General Contractor

Address

Contact Person

Phone/E-mail

Sub Contractor

Address

Contact Person

Phone/E-mail

Bond Company

Payment Bond No.

Address

Contact Person

Phone/E-mail



Credit Card Single Payment Authorization Form

I, _____
(Name of Authorized Card Holder)

From _____
(Customer Name)

Customer # _____

Authorize National Trench Safety to charge the credit card number listed below the amount of
\$ _____

Name as it appears on card _____

Credit Card Number _____

Expiration Date _____

Security Code _____

Cardholder's Billing Address _____

Cardholder's Phone Number _____

E-mail Address to Send Receipt _____

Invoices to paid _____

Job Information & PO# _____

Electronic Signature

For those submitting this credit card authorization via e-mail, type your name on the signature line and check the box beside "I agree." This is your electronic signature. By doing so you agree that you have reviewed and approve information contained herein.

Authorized Signature

I agree

Date



Recurring Credit Card Payment Authorization

With terms of Net Due Upon Receipt, I _____ (cardholder's name)

hereby authorize National Trench Safety to process payments for regularly cycle billed invoices every 28-Days to the below listed credit card. I understand and agree I will be charged the amount of the account's open balance for each invoice cycle billing period. I understand a receipt for each transaction will be provided to me at the below requested e-mail address and the charge will appear on my credit card statement. I agree that no prior notification will be provided for cycle billed invoices and charges will continue until and unless National Trench Safety receives notice from me or the organization I represent requesting to remove the cycle billing rental equipment from rent or providing alternate means of payment. If alternate means of payment is not provided, rental accrued prior to off-rent notice and/or any outstanding balance owed will be charged.

Billing Information

Company Name: _____
Customer No.: _____
Billing Address: _____
Phone No.: _____
E-mail Address: _____

Card Details

Visa **MasterCard** **American Express** **Discover**

Card Holder Name: _____
Credit Card No.: _____
Expiration Date: _____
Card CVV Number: _____
Project Information: _____

I understand all rentals & sales are subject to National Trench Safety's terms and conditions, and that this authorization will remain in effect until I cancel it in writing. I agree to notify National Trench Safety in writing of any changes in my account information or termination of this authorization at least ten (10) days prior to the next billing date. Written notice shall be via USPS Certified mail, return receipt requested or overnight courier and shall be deemed effective upon actual receipt. I certify that I am an authorized user of this credit card and will not dispute these pre-approved scheduled transactions so long as the transactions correspond to the terms indicated in this authorization form.

Signature: _____ Date: _____
(cardholder's signature)