



456 Kalaniana'ole Avenue, Hilo, Hawaii 96720

Telephone: (808) 969-1478

Fax: (808) 961-0423

### CUSTOMER CREDIT APPLICATION

*Please print clearly*

COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

NATURE OF BUSINESS \_\_\_\_\_

PROPRIETORSHIP \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION \_\_\_\_\_ PARENT COMPANY \_\_\_\_\_

#### PRINCIPAL NAMES, IF PARTNERSHIP OR CORPORATION

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_

#### BANK REFERENCES

Name of Bank \_\_\_\_\_ Contact Person \_\_\_\_\_

Address of Bank \_\_\_\_\_ Telephone \_\_\_\_\_

Checking Account No. \_\_\_\_\_ Loan with Bank Yes \_\_\_\_\_ No \_\_\_\_\_

#### TRADE CREDIT REFERENCES

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

ARE YOU LISTED WITH DUN & BRADSTREET? YES \_\_\_\_\_ NO \_\_\_\_\_ RATING \_\_\_\_\_

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Please read, complete & sign reverse side

**TO THE RENTAL COMPANY:**

The following names or individuals are authorized to charge on behalf of our company.  
Please print name(s).

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**FOR RENTAL COMPANY USE ONLY**

CREDIT APPROVED \_\_\_\_\_

CREDIT LIMIT APPROVED \$ \_\_\_\_\_

EFFECTIVE DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_

\_\_\_\_\_  
(TITLE)

\_\_\_\_\_  
(DATE)



## TERMS AND CONDITIONS

I (we) agree that if credit is extended, I (we) shall be subjected to the following terms and conditions:

1. That I (we) shall pay the amount or amounts due, as evidenced by the invoice, not later than thirty (30) days from date of invoice.
2. That I (we) agree that any amounts no paid within (30) days from date of invoice shall be considered delinquent and shall bear interest at the rate of one and three fourths (1.75%) percent per month on the unpaid balance. Annual interest rate shall not exceed twenty-one (21%) percent.
3. That should there be a charge that I (we) feel is in error or that I (we) need additional documentation for or explanation of payment will be made as follows:
  - a. Payment for undisputed charges will be made within the net thirty (30) day terms. Included with this payment to be transmitted to Rental Company will be a written notice outlining the invoice(s) or charge(s) in question, stating the amount and reason.
  - b. Upon receipt of payment and written notice the Rental Company will research and respond with documentation and explanation of charges due or notice of corrections made to the account, which is applicable.
4. That should the delinquent amount be referred to a collection agency or attorney, I (we) agree to accept all collection and/or legal fees incurred as additional charges subject to the thirty (30) day terms.
5. That the Rental Company shall render invoices for all charges incurred together with supporting documents, if necessary. The invoices shall be mailed to the customer within a reasonable period of time after the charges have been incurred.
6. That statements will be sent to the customer monthly, generally after the end of each accounting period of the Rental Company.

AMOUNT OF CREDIT LIMIT REQUESTED \$ \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Print/Type Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date



I (We) hereby give Harper Car & Truck Rental authorization to obtain any information from our banking institution as needed in the processing of the credit application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

.....  
Banking Institution \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Fax \_\_\_\_\_  
Attention \_\_\_\_\_

RE: Credit Reference for \_\_\_\_\_  
Checking Account Number \_\_\_\_\_

The above company has applied for credit with us and has listed you as a bank reference. Therefore, we are requesting that you kindly furnish our office with the following information.

Account Established \_\_\_\_\_

Other Accounts Savings \_\_\_\_\_ Loans \_\_\_\_\_

Average Balance \$ \_\_\_\_\_

Payment History (if applicable) \_\_\_\_\_

Comments and/or additional information \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for your cooperation in the above matter. For your convenience and to expedite the processing of the credit application, you may e-mail the completed form to [kona@harpershawaii.com](mailto:kona@harpershawaii.com). Should you have any questions, please do not hesitate to contact our office at (808) 969-1478.



**TRADE REFERENCE**

To: NAME: \_\_\_\_\_  
COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
FAX NO.: \_\_\_\_\_

**CREDIT REFERENCE FOR:** \_\_\_\_\_  
ACCOUNT: \_\_\_\_\_

The above company is seeking to establish a credit account with us. Your company was listed as a trade reference. To assist us in considering their application, we would appreciate your providing the following information.

**YEAR ACCOUNT ESTABLISHED:** \_\_\_\_\_  
**PAYMENT TERMS:** \_\_\_\_\_  
**AVERAGE BALANCE:** \_\_\_\_\_  
**PAYMENT HISTORY/DELINQUENCIES:** \_\_\_\_\_  
**OTHER COMMENTS:** \_\_\_\_\_

Thank you for your cooperation and assistance. For your convenience and to expedite this process, you may e-mail the completed form directly to [kona@harpershawaii.com](mailto:kona@harpershawaii.com). Should you have any questions, please do not hesitate to contact our Credit Application Processing Department at (808) 969-1478.

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**RELEASE**

**COMPANY:** \_\_\_\_\_  
**CONTACT:** \_\_\_\_\_

We hereby give authorization for our credit information to be released.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
TITLE: \_\_\_\_\_



**TRADE REFERENCE**

To: NAME: \_\_\_\_\_  
COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
FAX NO.: \_\_\_\_\_

**CREDIT REFERENCE FOR:** \_\_\_\_\_  
ACCOUNT: \_\_\_\_\_

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SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
TITLE: \_\_\_\_\_



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TITLE: \_\_\_\_\_