

# //EXPRESS DISPOSALS

840 Olds Rd.  
P.O. Box 812  
Douglas, Wy 82633  
expressdisposals.com  
307-359-6305

paul@expressdisposals.com

## Customer Credit Application

Customer Legal Name: \_\_\_\_\_

Physical Address Of Service: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_ Mobile Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_

Fax: (     ) \_\_\_\_\_ - \_\_\_\_\_ Website: \_\_\_\_\_

Email: \_\_\_\_\_ Do You Text Via Mobile Device? Yes No

Duns Number: \_\_\_\_\_ SS# XXX - XX - \_\_\_\_\_ Date Of Birth: \_\_\_\_\_ - \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ EIN #: \_\_\_\_\_ - \_\_\_\_\_

Requested Service Type: Residential \_\_\_\_ Commercial \_\_\_\_ Other \_\_\_\_

Are you part of a parent company? Yes No

If so please list Parent Company: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_

Duns Number: \_\_\_\_\_ EIN #: \_\_\_\_\_ - \_\_\_\_\_

### Credit References:

1. Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_ Account #: \_\_\_\_\_

2. Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_ Account #: \_\_\_\_\_

Have bankruptcy been claimed in the last 5 years by requesting customer? Yes No

Any liens, judgments, encumbrances Yes No

If Yes on Above Two Questions List State(s) and Counties: \_\_\_\_\_

Has Requested Customer Ever Had Prior Service With Express Disposals: Yes No

Business Owner / Individual Signature:

By signing this application, you authorize Snyder Transport, Inc DBA: Express Disposals to obtain information on you and or your business and principal owners from consumer credit bureaus and others for the sole purpose of extending credit and authorize any party receiving a credit inquiry from Snyder Transport, Inc DBA: Express Disposals to release any information requested.

All Applicants:

For and in consideration of the extension of credit for rental and services, the undersigned applicant "Customer" agrees to:

→ Pay stated amounts DUE within stated terms for rental and services and applicant understands that credit will be suspended at the option of credit grantor for payments not so paid.

→ Pay the late fee on all past due amounts accruing from the date of the invoice at a rate of eighteen percent (18%) per annum or, if less, the maximum rate allowed by law.

→ Pay credit grantor any handling fees associated with returned check(s) from applicant.

→ In the event applicant fails to pay credit grantor all amounts due hereunder, credit grantor will be entitled to collect all reasonable costs of collection, attorney fees and court costs.

→ Customer understands that all provided garbage receptacles are owned solely by Snyder Transport, Inc DBA: Express Disposals and customer will agree not to alter, modify, and improve garbage receptacles without written consent by Snyder Transport, Inc DBA: Express Disposals.

→ Customer understands abnormal damage to garbage receptacle resulting in act's of customer discretion may and will result in property damage to Snyder Transport, Inc DBA: Express Disposals and all necessary repairs and or replacement of garbage receptacle will be customer sole responsibility.

→ Indemnity / The "Customer" agrees to indemnify, defend, and save Snyder Transport, Inc or Express Disposals equipment harmless from and against any and all liability which the equipment may be responsible for or pay out as a result of bodily injuries (including death), property damage or any violation or alleged violation of the law to the extent caused by "customer" breach of this agreement or it's employees, agents, or contractor's in the performance of this agreement. Neither party shall be liable to the other for consequential, incidental or punitive damages arising out of or in connection with the performance or non-performance or scope of work involved of this agreement

The above information is correct to the best of my knowledge and I am authorized, in my capacity, to bind my firm accordingly. I understand and agree to the terms of this application. I represent that I have the financial ability and willingness to pay all invoices within established terms.

Signature: \_\_\_\_\_

Print: \_\_\_\_\_ Date: \_\_\_\_\_ 20\_\_\_\_

Note: All Fields Must Be Filled In To Process, Terms to this agreement may not be altered and is prohibited.

Email application to [paul@expressdisposals.com](mailto:paul@expressdisposals.com) or deliver to 840 Olds Rd. Douglas, WY 82633