



ADDITIONAL BILLING ACCOUNT REQUEST - EXISTING BILLING CUSTOMER

Use this form to obtain additional billing accounts for either brand.

ACCOUNT INFORMATION - To be completed by customer

Customer Name <input style="width: 90%;" type="text"/>	Address <input style="width: 90%;" type="text"/>	City <input style="width: 90%;" type="text"/>
State/Province <input style="width: 60%;" type="text"/>	ZIP/Postal Code <input style="width: 60%;" type="text"/>	Country <input style="width: 60%;" type="text"/>
Fax <input style="width: 60%;" type="text"/>	Contact Name <input style="width: 90%;" type="text"/>	Contact Title <input style="width: 90%;" type="text"/>
Contact Phone <input style="width: 60%;" type="text"/>	Contact Email <input style="width: 90%;" type="text"/>	
Billing Contact <input style="width: 90%;" type="text"/>	Billing Email <input style="width: 90%;" type="text"/>	

If you are applying for a Credit Card Account:

Cardholder Name <input style="width: 90%;" type="text"/>	Name of Person Authorizing Charges to Card <input style="width: 90%;" type="text"/>
Credit Card Type <input style="width: 60%;" type="text"/>	First 5 Digits of Card Number <input style="width: 60%;" type="text"/>
	Last 4 Digits of Card Number <input style="width: 60%;" type="text"/>
Card Expiration Date <input style="width: 60%;" type="text"/>	Name of Person to Contact for Remaining Credit Card Information <input style="width: 90%;" type="text"/>

PLEASE NOTE: Our credit terms are net 30. Phone Number of Person to Contact for Remaining Credit Card Information

I hereby authorize applicable rental charges to be charged to the credit card provided. YES NO **The system does not accept debit cards.**

Must be signed by owner or authorized officer	Title	Date
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Please print authorized signers name	Title	Date
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SUBMIT THE FORM

1. Complete the form.
2. Print the form by clicking the **Print Form** button.
3. Sign the completed print of the form and forward to the appropriate Business Rental Sales Executive/Truck Rental Employee

ACCOUNT VERIFICATION FOR ADDITIONAL ACCOUNTS - To be completed by Sales Executive

Existing Billing Number <input style="width: 90%;" type="text"/>	Existing Contract ID <input style="width: 90%;" type="text"/>	New Contract ID (if applicable) <input style="width: 90%;" type="text"/>
Expected Additional Volume <input style="width: 60%;" type="text"/>	Sold Since <input style="width: 60%;" type="text"/>	Terms <input style="width: 60%;" type="text"/>
Credit Card Attached? <input type="radio"/> YES <input type="radio"/> NO		

Additional remarks and experience

FOR INTERNAL USE ONLY - To be completed by Business Rental Sales Executive (BRSE)/Truck Rental Employee

BRSE: Please complete this section, review the form for accuracy, and process via CRM per credit process.

Truck Employee: Please complete this section, review the form for accuracy, and submit to your Corporate Rental Manager.

NOTE: If Truck Only, select below. Otherwise, select account type in CRM.

Business Rental Sales Executive/Truck Rental Employee <input style="width: 90%;" type="text"/>	Estimated \$ volume per year <input style="width: 90%;" type="text"/>
Submitted by (Name) <input style="width: 90%;" type="text"/>	Truck \$ volume per year <input style="width: 90%;" type="text"/>
Submitter Email <input style="width: 90%;" type="text"/>	Contract ID <input style="width: 90%;" type="text"/>
<input type="checkbox"/> Truck	Truck Contract ID <input style="width: 90%;" type="text"/>