



CREDIT APPLICATION

COMPLETE THE CREDIT APPLICATION AND EMAIL TO:
credit@mazzottarentals.com | Call 1-888-438-5438 for assistance

OFFICE USE ONLY Account No. _____ Sales Rep. _____

CONTACT AND BUSINESS INFORMATION

Company ("Applicant") Name				
D.B.A / Trade Name				
Mailing / Billing Address		City	State	Zip
Physical Address		City	State	Zip
Telephone		Fax	Email	
Corporation ☐	Partnership ☐	Federal/State/Local Government ☐	Sole Proprietorship ☐	Other ☐
Federal ID #		Tax ID #	Years in Business	
Has this company, its owners, or officers ever filed for bankruptcy? ☐ Yes ☐ No		Previous Business Name (if any)		

OWNERSHIP / OFFICER INFORMATION

Owner / Officers Name (Print)		Title
Phone	Email	
SSN	Physical Address	

BILLING INFORMATION

Accts Payable Contact	Phone	Email
PO required? ☐ Yes ☐ No	Email (for invoices)	

TERMS & CONDITIONS

1. Each invoice is due upon receipt.
2. If equipment is rented for more than 4 weeks, periodic unsigned invoices will be issued for rental charges due. All such invoices are due upon receipt.
3. At the discretion of Mazzotta Rentals, any account with a delinquent balance may be placed on a cash basis any time, and the equipment picked up without notice.
4. Mazzotta Rentals files preliminary lien notices and mechanics liens whenever necessary or required by law. This is a company policy, and is not a reflection of your credit standing.
5. For each delinquent account, customer agrees to pay a monthly service charge equal to 1.5% of the past due balance or the maximum service charge permitted by law in the state where the contract is signed.
6. Customer agrees to pay all reasonable attorney fees, collection costs, and court costs incurred by Mazzotta Rentals in enforcing these terms and conditions.
7. Customer authorizes Mazzotta Rentals to obtain credit reports, trade reports, and bank references for the purpose of determining the extension or continuation of credit to customer.
8. Customer agrees to the terms and conditions as stated on each and every Mazzotta Rentals' agreement, contract or invoice.

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 by the undersigned or his agents. It is understood and agreed that the undersigned specifically consents to Mazzotta Rentals investigating of the applicant's credit history and may utilize credit reporting services for information on the undersigned. Facsimile copies will be accepted 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 or 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.

Print Name: _____

Title: _____

Signature: _____

Date: _____

The individual completing this Application warrants that he/she is authorized to do so and agrees to the above terms and conditions on behalf of Applicant, and that the information provided in this Application is true and accurate.

CONSENT TO OBTAIN CONSUMER CREDIT REPORT:

The undersigned individual who is either a principal of the credit applicant or a sole proprietorship 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 the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.

CONTINUING PERSONAL GUARANTEE:

The undersigned hereby unconditionally guarantee(s) the full and prompt payment to Mazzotta Rentals when due all indebtedness, obligations, and liabilities of the customer named in the Credit Application, 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 credit terms of this Credit Application. This guarantee shall continue in force until notice in writing sent by certified mail, return receipt requested, is received by Mazzotta Rentals. 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. The undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guarantee, hereby consents to and authorizes the use of a consumer credit report on the undersigned, by the above named business credit grantor, from time to time as may be needed, in the credit evaluation process.

Date: _____

Signature: _____

Signature: _____



Mazzotta Rentals, Inc.
77 Boston Road
Middletown, CT 06457
TF: 1-888-GET-LIFT PH:
860-344-0178

Credit Card Authorization Form

Company Name _____

Cardholder Name _____

Billing Address _____

We hereby authorize Mazzotta Rentals, Inc. to charge the following credit card for any and all costs incurred while renting equipment from Mazzotta Rentals, Inc.

Check One: Visa MasterCard Amex Discover

Card # _____

Security Code _____ Expiration Date _____

The undersigned hereby unconditionally and personally guarantees prompt payment and performance to Mazzotta Rentals, Inc. The undersigned further agrees that this is a continuing guarantee and shall be applicable to any and all balances including service charges, interest, collection costs, and/or attorney fees until the account is paid in full and is mutually canceled by both parties.

Signature _____

Date _____



Manage your account online and on the go with our new Customer Portal! Go to: **mr-us.com** or call **1-888-GET-LIFT** (1-888-438-5438)





The Premier Provider of Aerial Lifts & Material Handlers

RENTER'S INSURANCE REQUIREMENTS

CUSTOMER'S INSURANCE COVERAGE. Rental customers agree to maintain and carry, at Customer's sole cost, the following minimum insurance coverage:

Commercial General Liability Insurance ("CGL") providing coverage equal to or greater than the standard Commercial General Liability Coverage Form (ISO CG 00 01 12 04 form) with limits of insurance not less than

- \$1 million per occurrence and;
- \$2 million in the aggregate; and;

Property Insurance For The Full Replacement Cost Of The Equipment (replacement with new), including coverage for all risks of loss or damage to the Equipment.

Customer shall obtain insurance policies that provide, or are endorsed to provide, that all insurance required hereunder is primary and non-contributory to any other insurance maintained by MRI. MRI shall be named as an additional insured for liability insurance and, if applicable, additional loss payee for property insurance. Any deductibles or self-insured retentions shall be the sole responsibility of the Customer. All insurance required by this agreement shall include a waiver of rights of recovery against MRI or its insurers by the Customer and its insurers, as well as a waiver of subrogation against MRI or its insurers. The policies required hereunder shall provide that MRI must receive not less than 90 days' notice prior to any cancellation.

Commercial Auto Liability Insurance with at least a per occurrence limit of:

- \$2 million *(This coverage is only required for rental equipment licensed for road use or, if customer elects to haul (deliver) rental equipment his or her self);*

FOR RENTAL OF EQUIPMENT NOT LICENSED FOR ROAD USE, CUSTOMER MUST EITHER:

(A) ELECT TO NAME MRI AS LOSS PAYEE EVIDENCING PROPERTY INSURANCE OVERAGE,

OR

(B) ELECTS THE RENTAL PROTECTION PLAN (RPP) FEE.

Please send certificates by email to: **credit@mazzottarentals.com** or mail copy to:

MAZZOTTA RENTALS, INC.

77 Boston Road

Middletown, CT 06457-0133

Attn.: Certificate Compliance Manager



CERTIFICATE OF LIABILITY INSURANCE

ISSUE DATE

mm/dd/yy

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Agent name Insurance Agent Address Insurance Agent Phone Number		!Your insurance agent will populate this document.	CONTACT NAME: PHONE (A/C, No. Ext): E-MAIL ADDRESS:		FAX (A/C, No):
			INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: Insurance Carrier's Name			
		INSURER B:			
		INSURER C:			
		INSURER D:			
		INSURER E:			
		INSURER F:			

INSURED Customer Name Address City, State ZIP	
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COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY			POLICY NUMBER	00/00/00	00/00/00	EACH OCCURRENCE \$ 1,000,000
	CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Each occurrence) \$ 50,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	POLICY ☐ PRO-JECT ☐ LOC ☐						PRODUCTS - COMP/OP AGG \$ 2,000,000
	OTHER:						
A	AUTOMOBILE LIABILITY			POLICY NUMBER	00/00/00	00/00/00	COMBINED SINGLE LIMIT (Each accident) \$ 1,000,000
	☒ ANY AUTO						BODILY INJURY (Per person) \$
	ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	SCHEDULED AUTOS						
	NON-OWNED AUTOS						
A	UMBRELLA LIAB ☒ EXCESS LIAB			POLICY NUMBER	00/00/00	00/00/00	EACH OCCURRENCE \$ 1,000,000
	CLAIMS-MADE						AGGREGATE \$ 1,000,000
	DED RETENTION \$						
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			POLICY NUMBER	00/00/00	00/00/00	☒ PER STATUTE ☐ OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N					E.L. EACH ACCIDENT \$ 100,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					E.L. DISEASE - EA EMPLOYEE \$ 100,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000
A	EQUIPMENT FLOATER			POLICY NUMBER	00/00/00	00/00/00	Leased / Rented Equipment \$xxx,xxx
	Or Inland Marine						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The policies identified herein have been endorsed to include Mazzotta Rentals, Inc. as loss payee for all equipment leased or rented from Mazzotta Rentals, Inc. (Equipment Floater) and as additional insured (General Liability and Auto)

This exact wording is mandatory

or Scheduled Equipment if the particular item is identified with year, make model and serial #

This limit should be greater than the value of the equipment being rented

CERTIFICATE HOLDER

Mazzotta Rentals, Inc.
77 Boston Road
Middletown, CT 06457

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Agent's Signature Required

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