



# Express Furniture Rental

Tell Us About Yourself!

## Individual Credit Application

Toll Free Phone: 1-800-933-3689

Toll Free Fax: 1-800-537-0747

### Identification:

First     M.I.     Last     Month     Day     Year  
Date of Birth

Cell Number     Phone Number     Fax Number

Social Security #     Drivers License #     State:     Month     Day     Year  
Expiration Date

### Delivery Address:

Street Address     Apt./Unit #     Complex Name

City     State:     Zip

### Billing/Permanent Address:

Street Address     Apt./Unit #     Complex Name

City     State:     Zip

### Employment:

Company     Street Address     City     State:     Zip

Phone     Ext.     Years on Job     Monthly Gross Salary    Full Time     Part Time

Position/Occupation     Supervisor's Name     Supervisor's Phone #     Ext.

### Credit:

Bank     Branch:     Account Number:

Credit Card Type     Account Number     Month     Year  
Expiration Date

### References:

Name     Relationship:     Phone Number

Street Address     City     State:     Zip

### Signature/Release

Everything I have stated on this information sheet is correct. I understand that you will retain this sheet whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. In the event my account becomes past due, I specifically authorize you to charge all amounts due to any of the major credit cared I have listed. I understand that my rental lease will not become effective until your approval of my credit. Prices are subject to change. All pricing is based on a three month minimum and does not include sales tax or optional damage waiver.

Signature \_\_\_\_\_

Date \_\_\_\_\_