

Salesman: _____

Store #: _____



**FAX OR MAIL THIS 2-PAGE APPLICATION TO:
ACCOUNTS@FRANKS-SUPPLY.COM**

Frank's Supply
3311 Stanford Drive NE
Albuquerque, NM 87107
Fax: 505-884-0244

Full Legal Name/Business Entity: _____

Doing Business as (DBA): _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

Email: _____

Type of Business: _____ Contractors License#: _____ Years in Business: _____

Bonding Company: _____ Contract: _____ Phone#: _____

Amount of Credit being Requested \$ _____ Tax Certificate Included? Yes ___ No ___ (if yes, original required)

Purchase Order Required? Dun & Bradstreet#: _____ Authorized Signers: _____

Corporation Partnership Proprietorship Tribal Entity FID# _____ State ID# _____

FINANCIAL INFORMATION

Bank: _____ Contact: _____ Account#: _____

Address: _____ Phone#: _____

TRADE REFERENCES

Name	Contact Address (City, State, & Zip)	Fax #	Account #
1.) _____	_____	_____	_____
2.) _____	_____	_____	_____
3.) _____	_____	_____	_____

PERSONAL INFORMATION ON OWNER/PRINCIPALS/GUARANTORS

Name/Title: _____ DOB: _____ Soc. Sec. #: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Annual Income \$ _____ Monthly Housing Payment \$ _____

TERMS

1% 15 days from Invoice, Net 30 days.

Person signing below, agrees to pay interest at the rate of 1.5% per month (18% per annum) on all past due balances plus all cost of collection and reasonable attorney's fees, pre- and post-judgement, if account is placed for collections. Applicant understands and agrees it is submitting itself to the jurisdiction of New Mexico and venue proper in the County of Bernalillo, and any claims of a sovereign status are hereby waived. Applicant authorized Frank's Supply Co. Inc., to obtain any information from the references listed and/or from any other source Frank's Supply Co. Inc., determines is necessary prior to extending credit. If Corporation, undersigned guarantor jointly and severally, hereby personally guaranty unconditionally the payment of any sums or obligations which are now or shall hereafter become due by the Applicant to the Creditor. Frank's Supply Co. Inc., is a provider of payment information to credit reporting agencies.

I agree to notify Frank's Supply Company of any change of address or ownership within 30 days.

Signature: _____ Date: _____

Name (Print or Type): _____

★ Signature of Officer / Owner is required before credit can be approved



GUARANTY AGREEMENT

In consideration of the extension of credit granted by Frank's Supply Co. Inc., the undersigned hereby personally and unconditionally guaranty payment without presentment, demand or notice, of whatever amount the Applicant shall at any time be owing. This shall be an open, absolute, and continuing guaranty, and shall continue in force notwithstanding any change in the form of indebtedness or renewals or extensions granted by Frank's Supply Co. Inc., unless and until expressly revoked by written notice via registered mail provided any such written revocation shall not affect any indebtedness contracted prior to receipt of the revocation. The undersigned further agrees to pay all costs of collection whether incurred pre- or post- judgement, including attorney's fees and interest.

Date: _____ Signed: _____
Guarantor (Sign Individually)

Date: _____ Signed: _____
Guarantor (Sign Individually)

If applicable, please submit tax exempt certificate and/or certificate of insurance. (See Insurance Certificate Requirements)

El Paso, TX
1211 Barranca Drive
Toll-Free (800) 748-3726



Hobbs, NM
2230 W. Bender Rd.
Toll-Free (866) 475-8665

Albuquerque, NM
3311 Stanford Drive
Toll-Free (800) 432-5254

Farmington, NM
2655 E. Bloomfield Highway
Toll-Free (800) 541-8449

Los Alamos, NM
268 DP Road
Toll-Free (888) 568-1100

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- Air Compressors
- Air Tools
- Backhoes
- Bobcat Loaders
- Cable Pullers



- Compaction Equipment
- Concrete Saws
- Core Drilling Rigs
- Cut-Off Saws
- Diamond Blades
- Forklifts

- Lasers
- Light Towers
- Mixers
- Piercing Tool
- Pipe Benders
- Ride-On Trenchers



- Rotary Hammers
- Scaffolding
- Scissor Lifts
- Welders



GSA Contract #
GS-06F-0031L



Family Owned and
Operated Since 1953

JOB INFORMATION SHEET

Customer: _____ Phone: _____
Street Address: _____ Email: _____
City: _____ State: _____

Customer: Owner General Contractor Subcontractor Material Supplier Other Leasehold Interest

DBE/MBE-Commercially Useful Function Verified

PROJECT INFORMATION

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____
SCR Number _____ (UT Projects Only)
MNLN Number _____ (IA Residential)

OWNER / AWARDDING AUTHORITY

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____

LENDER - (CA & AZ PROJECTS)

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____

ARCHITECH

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____

Well Site / GPS Location: _____
Estimated Quantity: _____
Rental: Estimated Monthly Fee: _____

This job will have: One Furnishing Several furnishings Do no know

Signature: _____
Customer: _____

GENERAL CONTRACTOR

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____

PRIME'S BONDING COMPANY

Is this a private bonded job?

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____

SUB'S BONDING COMPANY or LESSEE (if applicable)

NAME _____
STREET ADDRESS _____
PHONE _____
EMAIL _____
CITY _____ STATE _____ ZIP _____

Estimated Dollar Value: _____
Estimated Term of Rental: _____
Date: _____

QUALITY TOOLS & EQUIPMENT



SALES • RENTALS • SERVICE

CERTIFICATE OF INSURANCE REQUIREMENTS FOR RENTAL CUSTOMERS

Rental customers that have General Liability, Auto Liability, and Leased/Rented Equipment Insurance policies should furnish us with a certificate of insurance.

Frank's Supply Company, Inc. should be named as additional Insured on your General Liability Insurance policy and as loss payee on your Leased/Rented Equipment insurance policy. Certificate must show Franks Supply is listed as Loss Payee and Additional Insured.

Our Insurance company requires your General Liability Insurance policy to have limits of \$1 million each occurrence and \$2 million general aggregate.

Your Auto Liability Insurance policy should have a combined single limit \$1,000,000 for liability coverage. When renting an auto from Frank's Supply, we require Automobile Physical Damage insurance for hired autos with a limit adequate to cover the value of the automobile rented.

When renting a piece of equipment from us, you must insure Leased/Rented Equipment for a limit equal to the fair market value of the equipment being rented (\$100,000,.00 minimum).

Our insurance company requires that your insurance companies give us 30 days notice if they cancel your insurance.

Please ask your insurance agent to mail certificates of insurance to:

Frank's Supply Co., Inc.
3311 Stanford Dr . NE
Albuquerque, NM 87107

Or fax to our accounting department at (505) 884-0244

Or email a copy to aradmin@franks-supply.com

We will charge an additional 14% of the total rental equipment charge if we don't have a current certificate of Insurance on file that meets requirements.

Rev3/2/21