

**Carroll Musical Instrument Rentals, LLC
Total Piano & Organ Rentals, LLC
Carroll Rehearsal Studios, LLC
On Time Musical Instrument Rentals, Inc.
625 West 55th Street - 6th Floor
New York, NY 10019
(212)868-4120
(212)868-4126 (FAX)**

NEW CUSTOMER CREDIT APPLICATION

*In order to establish credit with the companies listed above we **must** have this form **completed** and **signed**.*

Amount of Credit to be requested \$ _____ Year Business Established _____
Amount of Initial Order \$ _____ Estimated Annual Purchases \$ _____
Full Name of Account _____
Mailing Address _____
City _____ State _____ Zip _____
Telephone Number (_____) _____ Fax Number (_____) _____
Date Submitted _____
Person to be contacted concerning: Payables _____ Ext. _____
Purchasing _____ Ext. _____
E-mail _____

CREDIT REFERENCES- COMPLETE ADDRESS, INCLUDING ZIP CODE

1. Name _____ Ph _____ Fax _____
Address _____ Zip _____
2. Name _____ Ph _____ Fax _____
Address _____ Zip _____
3. Name _____ Ph _____ Fax _____
Address _____ Zip _____

BANKING INFORMATION

Principal Bank _____ Account No. _____
Address _____ Officer _____
City _____ State _____ Zip _____ Phone _____

(PLEASE ATTACH SALES TAX EXEMPTION CERTIFICATE OR ALL APPLICABLE SALES TAXES WILL BE APPLIED TO INVOICES)

I agree to abide by the terms of the companies listed above, which are Net 30 Days from date of Invoice (unless otherwise stipulated). I further agree to pay Late Charges if invoices are paid beyond the agreed terms. Late Charges are computed at 1.5% per month, 18% per annum.

Signed _____ Title _____ Date _____

BANK RELEASE FORM

I authorize my bank _____
to release information to the companies listed above for the purpose of establishing credit with their company.

Name _____ Signature _____ Date _____