

YOUR FULL SERVICE AUDIO-VISUAL RENTAL COMPANY
www.oavs.com

NEW CUSTOMER APPLICATION
FOR BUSINESS RENTALS

Thank you for choosing Oakland Audio-Visual Service, Inc. As a new customer, please fill out the form below. Because the items we rent can have very expensive replacement costs, it is necessary for us to know more about whom we rent to. This is done to avoid having to take equipment deposits. If you don't wish to furnish us with this information, we will require a credit card deposit for the replacement cost of the items you rent.

COMPANY/ORGANIZATION NAME: (NO INITIALS PLEASE):

COMPANY ADDRESS:

CITY:

STATE:

ZIP:

MAIN PHONE NUMBER:

FAX NUMBER:

COMPANY WEB SITE:

YOUR NAME:

YOUR EMAIL ADDRESS:

YOUR CELL PHONE:

YOUR DIRECT PHONE NUMBER OR EXTENSION:

YOUR DEPARTMENT MANAGER:

MANAGER DIRECT LINE OR EXTENSION:

BUSINESS REFERENCES-companies you have worked with before-Bay Area companies preferred

THIS IS NOT A REQUEST FOR A CREDIT REFERENCES.
PLEASE CALL FOR A SEPARATE CREDIT APPLICATION IF DESIRED.

| COMPANY | CONTACT NAME | PHONE NUMBER | TYPE OF BUSINESS |
|---------|--------------|--------------|------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

THANK YOU FOR YOUR COOPERATION AND FOR YOUR BUSINESS.