

**COMPANY INFORMATION**

CONTACT / TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
BUSINESS PHONE: \_\_\_\_\_  
CELL PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
FEDERAL TAX ID: \_\_\_\_\_  
COMPANY TYPE / INDUSTRY: \_\_\_\_\_  
TIME IN BUSINESS: \_\_\_\_\_ # OF EMPLOYEES: \_\_\_\_\_  
TIME IN BUSINESS UNDER CURRENT OWNERSHIP: \_\_\_\_\_  
BUSINESS TYPE: \_\_\_\_\_  
 PARTNERSHIP    S-CORP.    SOLE PROP    MUNICIPAL  
 LLC    CORPORATION    NON-PROFIT  
ANNUAL GROSS INCOME: \_\_\_\_\_  
DO YOU RENT OR OWN YOUR BUSINESS LOCATION: \_\_\_\_\_  
IF RENT, LANDLORD NAME: \_\_\_\_\_  
LANDLORD PHONE: \_\_\_\_\_

**PRINCIPAL OWNER'S INFORMATION**

PHONE#: \_\_\_\_\_ % OWNERSHIP: \_\_\_\_\_  
SOCIAL SECURITY #: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
  
PRINCIPAL II NAME: \_\_\_\_\_  
PHONE#: \_\_\_\_\_ % OWNERSHIP: \_\_\_\_\_  
SOCIAL SECURITY #: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**BANK & TRADE REFERENCES**

BANK REFERENCE NAME: \_\_\_\_\_  
BANK ACCT NUMBER: \_\_\_\_\_  
BANK PHONE: \_\_\_\_\_  
BANK CONTACT: \_\_\_\_\_  
TRADE REFERENCE NAME: \_\_\_\_\_  
TRADE REFERENCE ACCT NUMBER: \_\_\_\_\_  
TRADE REFERENCE PHONE: \_\_\_\_\_  
TRADE REFERENCE CONTACT: \_\_\_\_\_

**EQUIPMENT INFORMATION**

EQUIPMENT TYPE: \_\_\_\_\_  
ESTIMATED COST: \_\_\_\_\_  
TIMEFRAME TO PURCHASE: \_\_\_\_\_  
VENDOR: \_\_\_\_\_

I / We hereby authorize any credit bureau or any other investigative agency to investigate the references herein listed or statements or other data obtained from me / us or from any other person pertaining to my / our credit and financial responsibility.

I / We represent, warrant and affirm that all of the statements made by me / us in this application are true and correct.

Fair Credit Reporting Act disclosure: This application for credit can be submitted to various financial institutions.

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Driver's License #                      State

\_\_\_\_\_  
Signature