

|  | CREDIT APP                              | PLICATION - ALL  |                      | S MUST BE D                  | ISCLOSED                           |   |  |
|--|---|--|----------------------|------------------------------|------------------------------------|---|--|
| BUSINESS TYPE: (CHECK O                              | ONE) OSOLE PROPRI                       | ETOR () PARTNER  | SHIP OO              | CORPORATION (                | S-CORPORATION                      | OLLC OLLP   |  |
| LEGAL BUSINESS NAME:                                 |   |  |                      | D / B/ A:                    | <u> </u>                           |   |  |
| NATURE OF BUSINESS:                                  |   | FEDERAL ID #:  |                      |                              | TIME IN                            | BUSINESS:   |  |
| MAILING/BUSINESS ADDRESS:                            |   | CITY:  |                      | STATE:                       | ZIP:                               | COUNTY:   |  |
|  |   |  |                      |                              |                                    |   |  |
| BUSINESS PHONE:<br>EXT.                              |   | BUSINESS FAX:  |                      |                              | CELL:                              |   |  |
| WEBSITE:   |   | LOCATION WHERE EQUIPMENT IS KEPT (IF DIFFERENT FROM ABOVE) |                      |                              |                                    |   |  |
| ANNUAL REVENUE:                                      | # OF EMPLOYEES:                         | DATE OF INCORPO  | RATION:              | STATE OF INCO                | PRPORATION: BUSI                   | NESS START DATE:                                      |  |
| GUARANTOR 1 FULL NA                                  | ME TITLE                                | SOCIAL SECURI  | TY #  % OW           |                              | BIRTH HO                           | ME ADDRESS  |  |
|  |   |  |                      |                              |                                    |   |  |
|  |   |  |                      |                              |                                    |   |  |
| Home Phone:  |   |  | E-mail:              |                              |                                    | Are you a homeowner? Yes No<br>Country of Citizenship |  |
| GUARANTOR 2 FULL NA                                  |   | 0  |                      | NED DATE OF E                | -                                  | ME ADDRESS  |  |
|  |   |  |                      |                              |                                    |   |  |
|  |   |  |                      |                              |                                    |   |  |
| Home Phone: Cell Phone:                              |   | E-mail:  |                      |                              | Are you a homeo                    | wner? OYes ONo  |  |
| Have you ever filed for bankrup                      | No If yes, what was the discharge date? |  |                      | Country of Citize            | - 1                                |   |  |
| GUARANTOR 3 FULL NA                                  | ME TITLE                                | SOCIAL SECURI  | TY # % OW            | NED DATE OF E                | BIRTH HO                           | ME ADDRESS  |  |
|  |   |  |                      |                              |                                    |   |  |
| Home Phone:  | Cell Phone:                             | E-mail:  | E-mail:              |                              | Are you a homeo                    | wner? (Yes (No  |  |
| Have you ever filed for bankruptcy protection? ()Yes |   | No If yes, what was the discharge date?                    |                      |                              | Country of Citizer                 |   |  |
| BANK / MONEY MAR                                     |   | ACCOL  |                      | TELEPHO                      |                                    | NTACT PERSON  |  |
|  |   |  |                      |                              |                                    |   |  |
|  |   |  |                      |                              |                                    |   |  |
| BUSINESS LOAN  | REFERENCE                               | ACCOL  | JNT #                | TELEPHO                      | NE # COM                           | NTACT PERSON  |  |
|  |   |  |                      |                              |                                    |   |  |
|  |   |  |                      |                              |                                    |   |  |
|  |   | VENDOR / EQUIP   | PMENT INFO           | RMATION                      |                                    |   |  |
| VENDOR:  | ADDRESS:                                |  |                      | CITY, STATE, ZIP:            |                                    | SALE PRICE:   |  |
| CONTACT:   | PHONE:                                  | FAX:   |                      | EMAIL:                       |                                    | FINANCE REQUEST:                                      |  |
| Naw YEAR: MAKE: MODEL:                               |   | DESCRIPTION:   |                      |                              | VIN / SERIAL:                      |   |  |
| O New YEAR: MAKE:<br>Used                            | WODEL.                                  |  |                      |                              | VIIV BEAIAE.                       | DELIVERY DATE:  |  |
| I hereby authorize you to whom this appli            | cation is made, or your agents, to i    | nvestigate my/our credit worthin                           | ness and will provid | de financial statements, tax | returns, etc., as you deem necessa | ry. I/we agree that any security deposit              |  |

paid is not refundable unless the application is rejected. By the execution of any lease/loan agreement, l/we warrant that the information submitted herein is found creat any necessary information. Further, l/we warrant that it is understood that Creditor reserves the right to reverse any credit decision if the information contained herein is found to be incorrect, or for any other reason, and l/ we will indemnify Creditor for any and all costs incurred with this application for credit including any cost incurred in the placement or reservation of the intended equipment based on the information contained herein.

**GUARANTOR 1 SIGNATURE** 

GUARANTOR 2 SIGNATURE

Χ\_

GUARANTOR 3 SIGNATURE

Х\_

BY CHECKING THIS BOX AND TYPING NAME ABOVE, I/WE ELECTRONICALLY SIGN THE APPLICATION

Χ.