

## Credit Application

5120 Westinghouse Blvd. Charlotte, NC 28273 Phone: 800-216-6587 Fax: 800-216-9567

### CUSTOMER INFORMATION

LEGAL COMPANY NAME		d/b/a	
STREET ADDRESS		CITY	STATE/PROVINCE ZIP/POSTAL CODE
CONTACT	PHONE ( ) -	FAX ( ) -	E-MAIL ADDRESS
FEDERAL TAX ID #	BUSINESS TYPE	<input type="checkbox"/> Corporation <input type="checkbox"/> S Corp. <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> C Corp. <input type="checkbox"/> General <input type="checkbox"/> Limited   Year Started:	
DESCRIPTION OF BUSINESS	Annual Revenue:	Tax Exempt ? Yes _____ No _____	NUMBER OF YEARS IN BUSINESS UNDER CURRENT OWNERSHIP:

### LEASE INFORMATION

EQUIPMENT DESCRIPTION (include manufacturer and model number)

ESTIMATED LEASE AMOUNT \$	LEASE TERM (months) <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60	<input type="checkbox"/> \$1.00 Buyout <input type="checkbox"/> 10% Purchase Option <input type="checkbox"/> Fair Market Value-Tax Lease	
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### OWNER/PRINCIPAL INFORMATION

PLEASE GIVE NAMES, HOME ADDRESSES, DATE OF BIRTH, SOCIAL SECURITY NUMBERS, TITLE OF OWNERS, PARTNERS, AND PRINCIPAL OFFICERS.

NAME	TITLE	Date of Birth	SOCIAL SECURITY NO. OR SIN
HOME ADDRESS	CITY	STATE/PROVINCE	ZIP/POSTAL CODE HOME PHONE NUMBER ( ) -
NAME	TITLE	Date of Birth	SOCIAL SECURITY NO. OR SIN
HOME ADDRESS	CITY	STATE/PROVINCE	ZIP/POSTAL CODE HOME PHONE NUMBER ( ) -

### REFERENCE INFORMATION

**BANK REFERENCE**

PRESENT BANK	ACCOUNT NUMBER
BRANCH	BANK OFFICER PHONE NUMBER ( ) -

**SECURED DEBT OR LEASE REFERENCES (If unavailable, (3) Trade References)**

1. COMPANY NAME	CONTACT	PHONE NUMBER ( ) -	FAX NUMBER ( ) -
2. COMPANY NAME	CONTACT	PHONE NUMBER ( ) -	FAX NUMBER ( ) -
3. COMPANY NAME	CONTACT	PHONE NUMBER ( ) -	FAX NUMBER ( ) -

*By my signature, I authorize Machinery Finance Group, its successors, nominees, or its assignees to investigate my business and/or personal credit standing. Each individual signing below certifies that the information provided in this credit application is accurate and complete. Each individual signing below authorizes us to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit requested, but also for the purposes of reviewing the account, increasing the credit line on the account (if applicable), taking collection action on the account, and for any other legitimate purpose associated with the account as may be needed from time to time. Each individual signing below further waives any right or claim, which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.*

X Signature _____	Signer's Printed Name _____	Date _____
X Signature _____	Signer's Printed Name _____	Date _____

**Fax completed application to Machinery Finance Group, Inc. at 800-216-9567 for immediate processing**