EQUIPMENT FINANCE APPLICATION

VENDOR & EQUIPMENT INFORMATION						
Equipment Description						
Vendor Name		Am	ount	New	Used	
BUSINESS INFORMA	TION					
Legal Business Name		-	Гrade Name			
Address	ddress		У	State	Zip	
Phone	Fax	Website		Years In Business		
Type of business	Sole Proprietorship	Partnership	Corporation	LLC Other	Tax ID	
PERSONAL INFORMATION - Principals/ Officers/ Guarantors						
Name	Title		Name	Title		
Address			Address			
Own Rent		Rent		Own Rent		
Phone	Soc. Sec. #		Phone	Soc. Sec. #		
Cell	Date of Birth	/ /	Cell	Date of Birth / /		
Email	Ownership %		Email	Ownership %		
COMPANY BANK REFERENCE						
Please attach last three months' business bank statements.						
DECLARATION						
The undersigned individual, on behalf of themselves and all others listed on this application, recognizing that their individual credit history may be a factor in the evaluation of the credit of the applicant, hereby consents to and authorizes Quail Financial Solutions and any assignee, lender, or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now and from time to time, as needed in the credit evaluation and review process, and waives any right or claim they would otherwise have under Fair Credit Reporting Act in the absence of this continuing consent.						
To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth (for individuals) and other information that will allow us to identify you. We may also ask to see your driver's license (for individuals) or other identifying documents.						
Signature			Signature			
Printed Name			Printed Name			
Date			Date			