



Equipment Leasing · Commercial Lending
Comprehensive Consulting

Application Date: _____

Sales Representative: _____

Email Address: _____

Phone Number: _____

COMPANY INFORMATION

Full Legal Company Name : _____

Contact Name: _____ Email Address: _____

Billing Street Address: _____ City: _____ County: _____ State: _____ Zip: _____

Equipment Location (if different from above): _____

Phone Number: _____ Fax: _____ Federal Tax ID#: _____ Nature of Business: _____

Please Check: Corporation General Partnership Limited Partnership Sole Proprietorship Non-Profit LLC State or Local Government

STATE or JURISDICTION OF INCORPORATION /ORGANIZATION: _____

OTHER LOCATIONS (attach additional sheets if necessary): _____

Principal/Partner/Officer:

Complete Home Address: _____

Home Phone#: _____ Social Security#: _____ % Ownership: _____ DOB: _____

X

By signing, you authorize us to investigate your credit as provided below

Principal/Partner/Officer:

Complete Home Address: _____

Home Phone#: _____ Social Security#: _____ % Ownership: _____ DOB: _____

X

By signing, you authorize us to investigate your credit as provided below

EQUIPMENT INFORMATION

Supplier Name: _____ Contact Name: _____

Lease Term (Months): _____ Estimated Equipment Cost: _____ Equipment Description: _____

End of Lease Purchase Option: Fair Market Value \$1.00 Out ___% of Total Cash Price Other: _____

TRADE REFERENCES

Company Name: _____

Company Address: _____ City: _____ State: _____ Zip: _____

Contact Name: _____ Phone Number: _____ Fax: _____

Company Name: _____

Company Address: _____ City: _____ State: _____ Zip: _____

Contact Name: _____ Phone Number: _____ Fax Number: _____

BANK REFERENCES

Bank Name: _____

Bank Address: _____ City: _____ State: _____ Zip: _____

Bank Contact Person: _____ Phone Number: _____ Account Number(s): _____

BUSINESS PURPOSE

You, the credit applicant, certify to us that you are applying for credit for a business purpose, and not for personal, family, or household purposes, and that the information you provided is true and correct.

USA PATRIOT ACT NOTIFICATION – The following notification is being provided to you pursuant to Part 326 of the USA Patriot Act of 2001, 31 CFR 103.121(b)(5):

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

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, including any deposit account, loan, lease, or extension of credit, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

RELEASE & AUTHORIZATION

To Whom It May Concern: I authorize and request you to release information concerning my personal or business credit standing for this Credit Application, any renewals or future extensions of credit, or for review or collection of any resulting account. I authorize Cardinal Business Financing, Inc. to share any such credit reports with its affiliates, assignees and potential funding partners.

Authorized Signature: **X** _____ Name and Title: _____ Date: _____