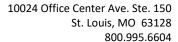


Legal Company Name			DBA (if a	DBA (if any)	
Business Structure: ☐ Corp.	☐ Partnership ☐	l Proprietor □ LLC Industry	<i></i>	No. of Employees:	
Address			City	State Zip	
Equipment Location (if different	ent)				
Company Phone		Fax	Years in Business	Years Under Current Management	
State of Organization / Incorporation		Federal ID #	± Web	osite	
Contact Person		Phone	Er	mail	
Revenue (prior fiscal year)	□ <\$500,000	□ 500,000 - \$1,000,000	□ \$1,000,000-\$5,000,000	□ >\$5,000,000	
EQUIPMENT INFORMATION					
Dealer	Sales Rep		Requested Term: 24, 36, 48, 60 Months (Circle One) Other		
Equipment		Cost \$	New	Used / Approximate age of equipment:	
PRINCIPAL INFORMATION					
Name		Title	%	Owned Phone #	
Home Address			S	ocial Security #	
Name		Title	%	Owned Phone #	
Home Address			Sc	ocial Security #	
BANK INFORMATION	To be completed	for each owner of 20% or mo	re. If there are additional ow	ners, please list on Page 2.	
			Branch Location	Officer	
				Type of Account	
TRADE REFERENCES	·	oodiit ii			
			Phone #	Contact	
				Contact	
Landlord			Phone #	Contact	
or it designee (and any assignee) obtaining bank & trade inform or collecting the resulting accreceive all phone, fax or ema	cknowledges that the gnee or potential ass nation for considering count. A copy of this il communications ser	above noted Principals have been ignee thereof) authorizing review of this application and subsequently for authorization shall be valid as the or	his/her personal credit profile from r the purposes of update, renewal of iginal. I understand that by providin ustrial Finance, Inc. By signature be	ose application for credit to Commercial Industrial Finance, Inc n a national credit bureau. Such authorization shall extend to or extension of such credit or additional credit and for reviewing ng our company's phone, fax or email information, I consent to elow, I affirm the identity of the respective individual/s identified	
AUTHORIZED SIGNATURE: X			Titi F:	DATE:	

BUSINESS APPLICATION

Chad Gendron
800.995.6604 ext. 114
Send completed application to cgendron@cifinance.com
or
314.842.7880 (fax)





ADDITIONAL PRINCIPAL/GUARANTOR INFORMATION

TO BE COMPLETED FOR EACH OWNER OF 20% OR MORE OF COMPANY

Name	Title	% Owned Phone #
Home Address		Social Security #
Name	Title	% Owned Phone #
Home Address		Social Security #
Name	Title	% Owned Phone #
Home Address		

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 financial institutions to obtain, verify and record identifying information on new customers. The personal data requested above will allow us to identify each person presented on this application. We may also ask for copies of drivers' licenses, tax IDs, or other identifying documents. By providing us with any telephone numbers for cellular phones or other wireless devices, you are expressly consenting to receiving any communications at those numbers - including but not limited to prerecorded or artificial voice message calls, text messages and calls made by an automatic telephone dialing system - from CIF, Inc. and its affiliates and agents. This express consent applies to each such telephone number that you provide to us now or in the future and permits such calls regardless of their purpose.

ECOA Notice

Thank you for your business credit application. We will review it carefully and get back to you promptly. If your application for business credit is denied, you have the right to a written statement of the specific reasons for that denial. To obtain that statement, please contact us within 60 days from the date that you were notified of our decision. We will send you a written statement of the reasons for that denial within 30 days of your request for the statement. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers our compliance with this law is the Federal Deposit Insurance Corporation, Consumer Response Center, 1100 Walnut Street, Box #11, Kansas City, MO 64106.