



EQUIPMENT FINANCE CREDIT APPLICATION
 ATTENTION: Gregory Bied
 208-871-9633 | FAX 714-919-8799
 www.afg.com / gbied@afg.com



CUSTOMER INFORMATION:

COMPLETE LEGAL NAME OF BUSINESS (including any dba's):		DATE BUSINESS STARTED: (under current ownership)		<input type="checkbox"/> SOLE PROP	<input type="checkbox"/> LLC	<input type="checkbox"/> NON-PROFIT
MAILING ADDRESS OF BUSINESS		CITY	STATE	ZIP CODE	COUNTY	
PHYSICAL ADDRESS OF EQUIPMENT (if different than above)		CITY	STATE	ZIP CODE	COUNTY	
PHONE NUMBER	FAX NUMBER	CONTACT PERSON		E-MAIL ADDRESS		
FEDERAL TAX ID#	TYPE OF BUSINESS	HAS THE BUSINESS OR ANY PRINCIPAL/ OWNER EVER DECLARED BANKRUPTCY?				

OWNER/STOCKHOLDER INFORMATION: IF MORE THAN TWO OWNERS, PLEASE USE ANOTHER SHEET

PRINCIPAL #1 NAME	% OWNERSHIP	TITLE	SOCIAL SECURITY #	DOB	OWN/RENT
HOME ADDRESS	CITY	STATE	ZIP	HOME PHONE	
PRINCIPAL #2 NAME	% OWNERSHIP	TITLE	SOCIAL SECURITY #	DOB	OWN/RENT
HOME ADDRESS	CITY	STATE	ZIP	HOME PHONE	

BANK REFERENCE: PLEASE INCLUDE LAST 3 MONTHS OF BUSINESS BANK STATEMENTS, SUMMARY PAGE ONLY

BANK NAME	ACCOUNT #	CONTACT	PHONE
-----------	-----------	---------	-------

COMMERCIAL LOAN REFERENCES:

CREDITOR	ACCOUNT #	ORIG LOAN AMOUNT	CONTACT	PHONE
CREDITOR	ACCOUNT #	ORIG LOAN AMOUNT	CONTACT	PHONE

VENDOR/EQUIPMENT INFORMATION: PLEASE ATTACH EQUIPMENT QUOTE OR INVOICE, IF AVAILABLE

VENDOR NAME	ADDRESS	CONTACT		
PHONE	TYPE OF EQUIPMENT	APPROXIMATE COST		
TERM REQUESTED <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> OTHER	END OF TERM <input type="checkbox"/> \$ 1 out <input type="checkbox"/> 10% <input type="checkbox"/> FMV <input type="checkbox"/> EFA	AGE OF EQUIPMENT <input type="checkbox"/> NEW <input type="checkbox"/> USED	MODEL YEAR (if used)	

CREDIT RELEASE AUTHORIZATION:

Each of the above listed **individuals** is/are willing to serve as guarantor of the above transaction. Each of the undersigned on his or her behalf, authorize(s) Alliance Funding Group and its nominees to **periodically** obtain, and all such parties to release, credit and financial information (personal or business) and all financial and other information submitted with this application including obtaining a credit report requested by Alliance Funding Group or its nominees and for such parties to provide information to others regarding their relations with the undersigned. I/We authorize making continued inquiries about such information and obtaining a credit report during the term of my lease(s) or other contracts as necessary to administer my leases and contracts and or accounts. I authorize all past or present creditors to release any and all necessary credit information and to respond to requests for information. I/we completed this application to obtain credit for the applicant and certify that all statements contained herein are true and correct. I certify that the leases, loans or other contracts applied for herein are for business and/or commercial purposes and not for personal purposes. 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 that 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. A number of federal agencies share enforcement responsibility for this law. Determining which agency to contact depends on the type of creditor you dealt with. Consult the creditor to whom this application is addressed for information on its regulator, or contact The Federal Trade Commission, Consumer Response Center, Washington D.C. 20580, 1-877-382-4357.

Print Name: _____ **Signature #1:** _____ **Title** _____ **Date:** _____

Print Name: _____ **Signature #2:** _____ **Title** _____ **Date:** _____