



2.

creditapp@northpointcredit.com

Company Information						
Legal Business Name:			Contact Person:			
- 5						
Address:			Years in Business:		Years under Present Ownership:	
7.64.6551						
City: State:		ite:	Zip:		County:	
,					,	
Phone: Fo	ax:		Email:			
Business Type:			Federal Tax			
☐C Corp ☐S Corp ☐ LLC ☐Sole Prop ☐Other			ID Number:			
Officer/Owner Information						
1. Name:		Title:		Social Security Number:		
Address:		Home Phone:		Cell Phone:		
City		Ctata	7in.	Percent Ownership:		
City:		State:	Zip:		Percent Ownership:	
2. Name:		Title:		Social	L Security Number:	
Z. Nullic.		Tide.		Social Security Harrisers		
Address:		Home Phone:		Cell Phone:		
City:		State: Zip:		Percent Ownership:		
Bank & Trade Reference						
Bank			Account			
Name:		Number:				
Contact Person:		Phone Number:				
Trade Reference			Account			
Name:			Number:			
Contact			Phone			
Person:		Number:				
Equipment Information						
Description:	□ N	lew Equipment	Estimated Cost: \$		Desired Term:	
	U	Jsed Equipment				
Vendor Name: Vendo		or Contact:		Phon	Phone Number:	
By signing this document, I/we hereby authorize Creditor, its assignee(s) and/or potential assignee(s), finance partners or financing sources to review my personal and business credit profile for the purposes of obtaining credit. In addition, I/We authorize and instruct any person, consumer reporting agency, or bank institution to compile and furnish to Creditor, its assignee(s) and/or potential assignee(s), finance partners or financing sources with any information it may have in response to an inquiry from an assignee and/or potential assignee, or creditor. I/We certify that the information provided in this application is true and correct and understand a facsimile, electronic, or other copy of this document shall be valid as the original.						
Signature(s) of Officers, Owne	rs and	or Guarantors				
1.				Date	Date:	

Date: