



Mequon, WI 53092 • Phone: 414-651-2444 • Email: mike@mkg-enterprises.com

# EQUIPMENT FINANCE CREDIT APPLICATION

## FAX:

### COMPANY INFORMATION

Applicant Company Name \_\_\_\_\_

Applicant Company Address \_\_\_\_\_

Applicant Company City/State/ZIP \_\_\_\_\_

Primary Contact Name \_\_\_\_\_ Phone Number (\_\_\_\_\_) \_\_\_\_\_

Nature of Business \_\_\_\_\_ Years in Business \_\_\_\_\_ Number of Employees \_\_\_\_\_

Principal \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Home Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

**TYPE OF BUSINESS**

PROPRIETORSHIP

PARTNERSHIP

CORPORATION

LLC

\_\_\_\_\_  
Taxpayer ID Number

\_\_\_\_\_  
State of Incorporation

\_\_\_\_\_  
When Incorporated

### BANK AND CREDIT INFORMATION

Bank Reference _____	Account Officer _____	Phone Number _____
Address City/State/ZIP _____	Checking Acct. No. _____	Other Acct. No. (Type) _____
Secured Credit References _____	Contact Person _____	Phone Number _____
Secured Credit References _____	Contact Person _____	Phone Number _____
Secured Credit References _____	Contact Person _____	Phone Number _____

### TRANSACTION INFORMATION

MAKE _____	MODEL _____	New/Used _____	Serial Number _____	Term (mos): _____	SALE PRICE _____
MAKE _____	MODEL _____	New/Used _____	Serial Number _____	Term (mos): _____	ATTACHMENTS _____
Transaction Type: <input type="checkbox"/> Retail Installment <input type="checkbox"/> Equipment Lease <input type="checkbox"/> Used Equipment					ATTACHMENTS _____
IF EQUIPMENT LEASE: Stated Purchase Option \$ / % _____ or FMV _____					NET TRADE-IN (_____) _____
Insurance Company _____	Agent _____			Phone (_____) _____	DOWN PAYMENT (_____) _____

### DISTRIBUTOR INFORMATION

Distributor Name \_\_\_\_\_ Representative \_\_\_\_\_

Location \_\_\_\_\_ Phone Number \_\_\_\_\_

**NOTICE TO ANY PERSON, CONSUMER AGENCY, BANK INSTITUTION OR CREDITORS: TO WHOM THIS MAY CONCERN**

This will be your authority and my request to you to release any information requested concerning (i) as an authorized representative of the company, the company's credit standing and (ii) as a principal of the company, my personal or company-credit standing.

SIGNATURE: **X** \_\_\_\_\_ DATE \_\_\_\_\_