MANUFACTURERS FUNDING
FINANCIAL SERVICES

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EQUIPMENT FINANCING APPLICATION

COMPANY INFORMATION

Legal Business Name:_____

Contact Person:_____ **Cell Phone:**_____ **Email:**_____

Address:_____ **City:**_____ **State:**____ **Zip:**_____

Years in Business:_____ **Federal Tax ID#:**_____ **Number of Employees:**_____

PRINCIPAL(S) INFORMATION

Name:_____ **Name:**_____

Title:_____ **Title:**_____

Home Address:_____ **Home Address:**_____

_____ _____

Birthday: _____ **Birthday:** _____

Social Security#:_____ **Social Security #:**_____

% Ownership:_____ **% Ownership:**_____

FINANCIAL DATA

Total Assets:_____ **Total Annual Revenue:**_____

Total Liabilities:_____ **Total Net Income:** _____

Any suits, judgments, tax liens or bankruptcies against the business or principals? ☐ **Yes** ☐ **No** **(if yes, explain on separate page)**

EQUIPMENT INFORMATION

Vendor Name:_____

Vendor Salesperson:_____ **Phone:**

Equipment Description:_____

Equipment Location:_____ **Equipment Price (w/o tax):**_____

(if different than above address)

CREDIT REFERENCE INFORMATION

Bank Name:_____ **Contact:**_____

Checking No:_____ **Loan No:**_____ **Phone:**_____

TERM REQUESTED

Months (please check a box): **36** ☐ **48** ☐ **60** ☐ **72** ☐ **84** ☐ **Structure:**

I (we) hereby authorize the release of any and all credit information to Manufacturers Funding, LLC, its designee or assigns, from the above listed references, and certify that the above information is true and accurate. The undersigned individual herby consents to and authorizes Manufacturers Funding, LLC and its designee or assigns to obtain and use a consumer credit report on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim that s/he would otherwise have under the Fair Credit Reporting Act. A facsimile, electronic or other copy of this authorization shall be as valid as the original.

X_____

SIGNATURE **SIGNER'S PRINTED NAME** **DATE**

X_____

SIGNATURE **SIGNER'S PRINTED NAME** **DATE**