

# Equipment Financing Application

<b>Attn:</b>	<b>Phone:</b>	<b>Fax:</b>
Vendor (Supplier of Equipment)		Phone No.
Vendor Address		Fax No.
Lessee (Borrower) Legal Name	Email Address	Phone No.
Address		Fax No.
Billing Address		Cell Phone No.

**Organization Type**    Corporation\_\_\_    Partnership\_\_\_    Sole Proprietorship\_\_\_    Limited Liability Co. \_\_\_    **Tax ID No.** \_\_\_\_\_

**Equipment**    New Equipment Purchase\_\_\_    Used Equipment Purchase\_\_\_    Growth\_\_\_    Replacement\_\_\_    Refinance\_\_\_

<b>Equipment Description</b>	Equipment Price _____
	Less Trade _____
	Less Down Payment _____
	Finance Amount _____

**Type of Financing Desired**    Loan     Lease (\$1.00 purchase)     Lease (Fair Market Value)     Other     **Lease/Loan Term**    36     48     60     72     84     Other \_\_\_\_\_

**Lessee/Borrower Credit Information**  
**Years in Business** \_\_\_\_\_    **No. of Employees** \_\_\_\_\_    **Annual Revenue \$** \_\_\_\_\_    **Backlog \$** \_\_\_\_\_

**Top Customers**

_____ % of annual sales	Name _____	City, State _____
_____ % of annual sales	Name _____	City, State _____
_____ % of annual sales	Name _____	City, State _____

Owner/Guarantor Name \_\_\_\_\_    DOB \_\_\_\_\_    Social Security No. \_\_\_\_\_

Residence Address \_\_\_\_\_    Residence Phone No. \_\_\_\_\_

Owner/Guarantor Name \_\_\_\_\_    DOB \_\_\_\_\_    Social Security No. \_\_\_\_\_

Residence Address \_\_\_\_\_    Residence Phone No. \_\_\_\_\_

**References**

Bank	Business and/or Personal Acct No.	Contact Name	Phone No.
Finance Company	Account No.	Contact Name	Phone No.
Finance Company	Account No.	Contact Name	Phone No.

Comments \_\_\_\_\_

## Signatures

I certify that the information stated in this application is true and correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You and/or your assigns are authorized to check my credit and employment history, obtain insurance information and to answer questions about your credit experience with me. I authorize you to contact my creditors and authorize any creditor so contacted to release to you such credit information as you may request.

Applicant's Signature \_\_\_\_\_    Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_    Date \_\_\_\_\_

**IMPORTANT:** For all transactions over \$250,000 please attach the following: 1) last two years FYE Financial Statements, 2) last two years Profit/Loss Statements and 3) latest interim statement with comparable prior year figures, if available.

Notice: To help the government fight the funding of terrorism and money laundering activities, U.S. Federal law requires financial institutions to obtain, verify and record information that identifies each person (individuals or businesses) who opens an account. What this means for you: When you apply to open an account or to add any additional service, we will ask you for your name, address, and taxpayer ID number and other information that will allow us to identify you. We may also ask to see other identifying documents.

CONSTRUCTION WORK STORY

Co. Name: \_\_\_\_\_

CONTRACT WITH:	CONTACT NAME & TEL. NO.	JOB DESCRIPTION	AMOUNT	% COMPLETE	% PAID	ESTIMATE COMPLETE

## PERSONAL FINANCIAL STATEMENT

**PERSONAL INFORMATION:**

Name of Applicant \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_

Residence Address \_\_\_\_\_ No. of Yrs. \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Business \_\_\_\_\_

Employer / Occupation \_\_\_\_\_ No. of Yrs. \_\_\_\_\_

Driver's Lic# or UBI# \_\_\_\_\_

Spouse's Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_

Employed by \_\_\_\_\_ Telephone \_\_\_\_\_

Nearest Living Relative \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

ASSETS		LIABILITIES	
Cash in Bank		Equipment Debt (schedule IV)	
Stocks/Bonds (schedule I)		Income Tax Payable	
Accts./Notes Receivable (schedule II)		Mortgages on Real Estate (schedule III)	
IRA,Pension,Retirement _____		Other Debts (schedule V)	
Real Estate Owned (schedule III)			
Automobile(s) _____ year _____ make			
_____ year _____ make			
Equipment (schedule IV)			
Other assets-itemize _____			
<b>Total Assets</b>		<b>Total Liabilities</b>	
		<b>Net Worth (Assets Minus Liabilities)</b>	
		<b>Total Liabilities and Net Worth</b>	

SOURCE OF INCOME		CONTINGENT LIABILITIES	
Salary: ( ) Monthly ( ) Annual		As Endorser/Co-Maker _____	
Bonus/Commission ( ) Monthly ( ) Annual		On Lease/Contracts _____	
Pension/Retirement ( ) Monthly ( ) Annual		Other Special Debt Not Listed Above	
Other/Spouse Income ( ) Monthly ( ) Annual		Explain _____	
Real Estate Income			
<b>Totals</b>			

Have you ever taken bankruptcy? ( ) Yes ( ) No If yes, please attach explanation.

Are you a defendant in any suit or legal action? ( ) Yes ( ) No If yes, please attach explanation.

Personal Bank Account at \_\_\_\_\_ Branch \_\_\_\_\_ Phone \_\_\_\_\_

Checking Account No. \_\_\_\_\_ Savings Account No. \_\_\_\_\_

For the purpose of procuring and maintaining credit, in any form whatsoever, with you from time to time, the undersigned submits the foregoing and following statement and information contained on both pages of this statement both written and printed and including supplemental statements as being a full, true, and correct statement of undersigned's (and spouse's if applicable) financial condition on the date stated. The undersigned agrees to notify you immediately in writing of any materially unfavorable change in undersigned's financial condition, and in the absence of such notice, or of a new and full written statement, this may be considered as a continuing statement and substantially correct; and it is hereby expressly agreed that upon application for further credit, this statement shall have the same force and effect as if delivered as an original statement of undersigned's financial condition (and spouse's if applicable) at any time such further credit is requested. If any statement herein is incorrect in any material respect, or if the undersigned shall fail to comply strictly with any agreement set forth herein, then at your election without notice all obligation of the undersigned to you shall be immediately due and payable.

I consent to any of the references above as well as any other source of information about my creditworthiness disclosing such information to Eagle Crusher Company, Inc., or its agent and further consent to information concerning this application or this account being given to credit reporting agencies or other creditors.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE COMPLETE BOTH FORMS**

Schedule I STOCKS & BONDS				
Name of Company	Exchange Listing	No. of Shares	Value Per Share	Total \$
Listed Securities				

Unlisted Securities				
				Total \$

Schedule II ACCOUNTS & NOTES RECEIVABLE				
Due From	Monthly Income	Present Balance	Collateral	Comments
				Total \$

Schedule III REAL ESTATE OWNED					
Description/Address	Year Acquired	Cost	Market Value	Mortgage	Monthly Pmt.
					Total \$

Schedule IV EQUIPMENT					
Description(make/model/year)	Market Value	Balance Owing	Lienholder	Account No.	Monthly Pmt.
					Total \$

Schedule V ACCOUNTS, CREDIT CARDS & OTHER DEBTS PAYABLE			
Payable to	Collateral	Monthly Pmt.	Balance
			Total \$

**INSURANCE AGENT**

Agent \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

TRADE REFERENCES				
Name	Phone	Contact	Account No.	Type of Account

# CHECKLIST

- \_\_\_\_\_ CREDIT APPLICATION COMPLETELY FILLED OUT
- \_\_\_\_\_ CONSTRUCTION WORK STORY
- \_\_\_\_\_ LAST 3 YEARS OF CORPORATE FINANCIAL STATEMENTS COMPLETE WITH BALANCE SHEET, P&L STATEMENT, AND NOTES TO THE FINANCIALS
- \_\_\_\_\_ MOST CURRENT INTERIM FINANCIAL STATEMENT WITH COMPARATIVE STATEMENT FOR SAME PERIOD FROM THE PRIOR YEAR
- \_\_\_\_\_ LAST 3 YEARS OF CORPORATE TAX RETURNS
- \_\_\_\_\_ PERSONAL FINANCIAL STATEMENT ON ALL OWNERS
- \_\_\_\_\_ LAST 3 YEARS OF PERSONAL TAX RETURNS ON ALL OWNERS
- \_\_\_\_\_ LIST OF ALL EQUIPMENT OWNED WITH COMPLETE DESCRIPTION, LIENHOLDER, MARKET VALUE, BALANCES, AND PAYMENT TERMS
- \_\_\_\_\_ INCLUDE ALL CONTRACTS FOR WORK AND INFORMATION ON MATERIALS IN YARD ALONG WITH AMOUNTS, PRICES, CONTACTS, AND PHONE #'S
- \_\_\_\_\_ IF COMPANY IS A STARTUP OR LESS THAN 3 YEARS OLD, PLEASE INCLUDE BUSINESS PLAN, PROFORMA STATEMENTS, AND FORECASTS.

PLEASE NEXT DAY ALL THE ABOVE INFORMATION THAT IS APPLICABLE TO:

EAGLE CRUSHER COMPANY, INC.  
525 SOUTH MARKET STREET  
GALION, OH 44833  
ATTN: SHAWN JURY