



Fax application to 800-830-9855

Referred by GrinderTrader.com

MATT WELLY

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800-830-9855 FAX

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9436 HAMILTON DRIVE

MENTOR, OH 44060

Credit Application

BUSINESS INFORMATION				<i>Please fill out application completely</i>				
Company Name:								
Physical Address:			City:		State:		Zip Code:	
Nature of Business:								
Type of Business (Check One): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> LLC								
Business Phone:		Cell Phone:		Fax Number:		Contact Name:		
Federal I.D. No.:		Time in Business:		Annual Sales:		Number of Employees:		
OWNERSHIP INFORMATION				<i>Include all owners to account for 100% of company ownership</i>				
1. Owner / Primary Contact			Title:		Ownership %		SSN:	
Home Address:			City:		State:		Zip Code:	
Home Phone:		Cell Phone:		Email Address:				
2. Owner			Title:		Ownership %		SSN:	
Home Address:			City:		State:		Zip Code:	
Home Phone:		Cell Phone:		Email Address:				
BANK INFORMATION				<i>Include bank account # and phone #</i>				
Bank Name:			Business Account #:		Bank Contact:		Phone Number:	
EQUIPMENT INFORMATION				<i>Please include Yr., Make, & Model #.</i>				
<i>Please attach the equipment quote and/or picture if available</i>						<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>
1	Qty:	Price:	Description:					
2								
<u>DEALER/ SUPPLIER:</u>			<u>Contact Person:</u>		<u>Telephone Number:</u>		<u>Fax Number:</u>	

*What additional equipment purchases are you considering in the next 3-6 months? _____

Each undersigned individual does hereby authorize the release of any and all credit information pertaining to the above credit application to ACG Equipment Finance LLC and/or its assignees. Such authorization shall extend to obtaining credit information including personal credit bureau's as well as bank and trade references. A fax copy of this form shall be valid as an original.

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____