

Federal Reserve Help Center, PO Box 1200, Minneapolis, MN 55480.

Equipment Finance Application



Business Information

Business Street Address:				
City:	County:	State:	Zip:	_ □ Own? OR □ Rent?
Equipment Location (if differ	rent than above):			
City:	County:	State:	Zip:	_ □ Own? OR □ Rent?
Contact Name:	E-Mail:	E-Mail: Cell Phone #:		
Office Phone #:	Ext:	_ Web Address:		
In Business Since:	Years Under C	urrent Ownership:	#of Employees:	
Fed Tax ID #:	State o	of Incorporation:		
\square Sole Proprietorship \square	Partnership □ Corpo	ration \square LLC Type	of Business:	
Principal / Owner II	<i>nformation</i> (please us	e a 2 nd application if mo	re than 2 principals)
Principal/Owner:		Title:	Emai	l:
Home Address:		City:	State	:Zip:
Birthdate: SS #	#:	% Ownership:	Cell Phon	e:
Principal/Owner:		Title:	Emai	l:
Home Address:		City:	State	:Zip:
Birthdate:SS	#:	% Ownership: _	Cell	Phone:
Bank and Trade Info	ormation			
Business Bank Name:		Contact:		
Lease or Loan Reference: _		Original Amount.:		
Equipment to be Fire	nanced Information	,		
		Contact	Pho	one #:
Equipment Supplier:		Contact		
Equipment Supplier: Equipment Description (Att Equipment Cost: \$	tach quote if available):			□ New □ Us

Thank you for completing the credit application. Please upload a copy of the equipment quote(s) you are considering (even if not finalized). Three months bank statements are also helpful. If available, please upload here. We will be in contact within one business day. We look forward to discussing this purchase with you.

applicant has in good faith exercised any right under the Consumer Credit Protection Act. For assistance from the federal agency that administers compliance with the law concerning this credit, contact