

CREDIT APPLICATION

APPLICATION CHECKLIST

<input type="checkbox"/> Equipment Invoice and/or Quote	<input type="checkbox"/> 3 Most Recent Bank Statements	<input type="checkbox"/> Interim Statements (if older than 120 days)	<input type="checkbox"/> Last 2 years Financial Statement	<input type="checkbox"/> Personal Financial Statement
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General Information

Legal Business Name: <input type="text" value="Anderson, Brown and Le"/> DBA (if applicable): <input type="text"/> website: <input type="text"/> Address (Physical): <input type="text" value="Some Random Street Name 3/5"/> Line 2: <input type="text"/> City: <input type="text" value="South Dakota"/> State: <input type="text" value="South Dakota"/> Zip Code: <input type="text" value="asdf"/> Postal Address: <input type="text"/> Line 2: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip Code: <input type="text"/>	Business Phone: <input type="text" value="213-875-1856"/> Federal Tax ID#: <input type="text" value="1288188199"/> Business Type: <input type="text"/> Years in Business: <input type="text" value="03-03-2025"/> Contact Name: <input type="text" value="Jennifer Mora"/> Contact Title: <input type="text"/> Contact Mobile #: <input type="text" value="213-875-1856"/> Contact e-mail: <input type="text" value="mora@example.net"/>	Have you ever file for bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/> Bankruptcy date: <input type="text"/> Month <input type="text"/> Date <input type="text"/> Year <input type="text"/> Do you have any outstanding judgments or tax liens? Yes <input type="checkbox"/> No <input type="checkbox"/>
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Principal(s) Guarantor(s):

Name (Principal 1): <input type="text" value="Jennifer Mora"/> Driver's License #: <input type="text"/> % of Ownership: <input type="text" value="100"/> Home Address: <input type="text" value="Some Random Street Name 3/5"/>	Title: <input type="text"/> DOB: <input type="text" value="03-05-2025"/> / City: <input type="text" value="West Kathryn"/> Zipcode: <input type="text" value="88888"/>	SS#: <input type="text" value="945-21-5205"/> Marital Status: <input type="text"/> Phone #: <input type="text" value="213-875-1856"/> Current Residence: <input type="text"/>
Name (Principal 2): <input type="text"/> Driver's License #: <input type="text"/> % of Ownership: <input type="text"/> Home Address: <input type="text"/>	Title: <input type="text"/> DOB: <input type="text"/> / / City: <input type="text"/> Zipcode: <input type="text"/>	SS#: <input type="text"/> Marital Status: <input type="text"/> Phone #: <input type="text"/> Current Residence: <input type="text"/>

Bank References

Bank (primary): <input type="text"/>	Branch: <input type="text"/>	Acct #: <input type="text"/>
Do you have a Line of Credit with your Bank? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what is the line of Credit Limit? \$ <input type="text"/>	

Finance/Trade References:

Company: <input type="text"/>	Phone #: <input type="text"/>	Acct #: <input type="text"/>	Contact Name: <input type="text"/>
Company: <input type="text"/>	Phone #: <input type="text"/>	Acct #: <input type="text"/>	Contact Name: <input type="text"/>

Insurance Agency/ Broker:

Agency Name: <input type="text"/>	Contact Name: <input type="text"/>	Phone #: <input type="text"/>	e-mail: <input type="text"/>
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Personal References:

Name: <input type="text"/>	Relationship: <input type="text"/>	Address: <input type="text"/>	Phone #: <input type="text"/>
Name: <input type="text"/>	Relationship: <input type="text"/>	Address: <input type="text"/>	Phone #: <input type="text"/>

IMPORTANT INFORMATION ABOUT ESTABLISHING A RELATIONSHIP WITH CEFI

To help the United States Government fight terrorism and money laundering, Federal law requires us to obtain, verify, and record information that identifies each person or business that opens an account or establishes a relationship. What this means for you: when you open an account or establish a relationship, we will ask for your name, street address, date of birth, and identification number, such as a social security number or taxpayer identification number. For businesses, we will ask for the business name, street address and tax identification number. Federal law requires us to obtain this information. We may also ask to see your driver's license or other identifying documents that will allow us to identify you.

I / We authorize Commercial Equipment Finance, Inc. "CEFI" and its agents to make whatever credit inquiries it deems necessary in connection with a lease/loan application. I / We authorize and instruct any person, trade reference, bank, and consumer reporting agency to compile and furnish to Commercial Equipment Finance, Inc. any information that it may have or obtain in response to such credit inquiries and agree that such information, along with the application, shall remain Commercial Equipment Finance, Inc. property whether or not the lease/loan application is approved.

Applicant Signature: _____	Name: <input type="text" value="Jennifer Mora"/>	Date: <input type="text" value="03-14-2025"/>
Guarantor Signature: _____	Name: <input type="text"/>	Date: <input type="text"/>
Guarantor Signature: _____	Name: <input type="text"/>	Date: <input type="text"/>

COMMERCIAL EQUIPMENT FINANCE INTERNATIONAL, LLC
COMMERCIAL EQUIPMENT FINANCE, INC.

PERSONAL FINANCIAL STATEMENT

Name: _____

As of: _____

Assets	Amount in Dollars
Cash - checking accounts	
Cash - savings accounts	
Certificates of deposit	
Securities - stocks / bonds / mutual funds	
Notes & contracts receivable	
Life insurance (<i>cash surrender value</i>)	
Personal property (<i>autos, jewelry, etc.</i>)	
Retirement Funds (<i>eg. IRAs, 401k</i>)	
Real estate (<i>market value</i>)	
Capital invested in business	
Other assets (<i>specify</i>)	
Total Assets	\$ -

Liabilities	Amount in Dollars
Current Debt (<i>Credit cards, Others</i>)	
Notes payable (<i>Loan</i>)	
Taxes payable	
Real estate mortgages (<i>outstanding balance</i>)	
Other liabilities (<i>Student loan, Car loan</i>)	
Other liabilities (<i>specify</i>)	
Total Liabilities	\$ -
Net Worth	\$ -

Signature: _____

Date: _____