

CREDIT APPLICATION

PLEASE FAX OR SEND APPLICATION TO:

65 Enterprise Aliso Viejo, CA 92656

(949) 525-4597 Phone - (866) 417-6921 Toll Free

(949) 916-3901 Fax

E-mail: bbernal@partners-capital.com



COMPANY INFORMATION

Tax ID #:

Legal Company Name

Company Address

City

State

Zip

Authorized Signer

Title

Bus. Telephone

Business Structure

No. of Years in Business

Equipment Cost \$

PERSONAL INFORMATION

Name

Social Security #

Ownership %

Own/Rent Home

Home Address

City

State

Zip

Home Phone Number

()

Name

Social Security #

Ownership %

Own/Rent Home

Home Address

City

State

Zip

Home Phone Number

()

BANK REFERENCES

Name of Bank / Branch

How Long?

Checking Acct. #

Telephone

Contact Officer

Name of Bank / Branch

How Long?

Checking Acct. #

Telephone

Contact Officer

()

TRADE REFERENCES

Name of Supplier

Acct #

Telephone

Contact Person

()

LEASE / LOAN REFERENCES

Name of Lender

Original Amount

Loan Acct. #

Telephone

Contact Person

\$

()

EQUIPMENT DESCRIPTION

Term Requested: Months 12 – 24 – 36 – 48 – 60 – 72

Vendor/ Supplier:

Equipment Type:

DECLARATION

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes Partners Capital Group, to obtain from third parties, information it deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes Partners Capital Group, its designee, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this Application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. I authorize all deposit, borrowing, financial and trade information to be released by telephone or fax. A photocopy or fax of this authorization shall be valid as the original. To help fight terrorism and money laundering, Federal Law requires banks to verify the information you provide, which may include driver's license or other documents, to identify you.

Applicant: _____ Signature : _____ Title: _____ Date: _____

Email Add: _____