

BUSINESS APPLICANT INFORMATION				
Legal Business Name			Telephone	Fax
Business Address		City	State	Zip Code
Type of Business <input type="checkbox"/> Sole Prop. <input type="checkbox"/> Partnership <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> LLC <input type="checkbox"/> LLP			Year of Incorporation	State of Incorporation
No. of Employees	Years in Business under current Ownership:	Rent Property <input type="checkbox"/> Own Property <input type="checkbox"/>	Federal Tax I.D. #	DUNS Number
Will the Equipment be located at the above address? <input type="checkbox"/> Yes <input type="checkbox"/> No (Other Location):			Have you ever filed for Bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes Date of BK: _____ Please explain on additional sheet	

EQUIPMENT INFORMATION			
Name of Vendor		Contact Person	Telephone
Address		City	State Zip Code
Description of Equipment		Cost \$	Months Requested <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> ? _____

OWNERSHIP INFORMATION				
Principal's Name	Home: <input type="checkbox"/> Rent / <input type="checkbox"/> Own	Title	% of Ownership	Social Security No.
Address		City	State	Zip Code
Principal's Name	Home: <input type="checkbox"/> Rent / <input type="checkbox"/> Own	Title	% of Ownership	Social Security No.
Address		City	State	Zip Code

BUSINESS BANK INFORMATION			
Name of Bank	Telephone	Average Bank Balance	Account No.
		Checking \$ Savings \$	
Name of Bank	Telephone	Average Bank Balance	Account No.
		Checking \$ Savings \$	

BUSINESS LOAN / LEASE INFORMATION			
Name of Lender	Telephone	Contact Person	Account No.
Name of Lender	Telephone	Contact Person	Account No.

BUSINESS TRADE INFORMATION (Suppliers)			
Business Name	Telephone	Contact Person	Account No.
Business Name	Telephone	Contact Person	Account No.

CREDIT RELEASE AUTHORIZATION	
<p>The undersigned individual(s) who is/are either a principal, a personal guarantor or a sole proprietorship of the credit applicant, recognize that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant hereby consents and authorizes Charcole Capital Corp. Its successors or assigns ("Charcole Capital"), to investigate (Directly or through an agent or nominee) our credit profile from one or more national credit bureaus. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit. ECOA NOTICE: If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Credit Administrator, (800) 438-1470 within 60 days from the date you are notified of our decision. We will send you a written statement within 30 days of receiving your request. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applications on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.</p>	
Signature: _____	Signature: _____
Name: _____	Name: _____
Date: _____	Date: _____