

Application Date:

Business Name (including DBA, if applicable)			Telephone #		Fax
Business Address		City	State	Zip	Federal Tax ID
Website		Email address		Contact Name	Contact Phone
Location of Equipment (if different than above)		Date Established		Length of ownership _____ years, _____ months	Type of business
Check One:	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation* • State: _____	<input type="checkbox"/> Partnership	<input type="checkbox"/> LLC	<input type="checkbox"/> LLP

Owners/Investor(s)

1. Owner/Investor (full legal name)	Birth Date	Title	Ownership percentage	
Home address	City		State/ZIP	Telephone #
2. Owner/Investor (full legal name)	Birth Date	Title	Ownership percentage	
Home address	City		State/ZIP	Telephone #
3. Owner/Investor (full legal name)	Birth Date	Title	Ownership percentage	
Home address	City		State/ZIP	Telephone #

Use of Funds (check all that apply)

<input type="checkbox"/> EQUIPMENT: <input type="checkbox"/> New <input type="checkbox"/> Used	Description:	Equipment Price: \$
<input type="checkbox"/> OTHER:	Description:	

PERSONAL CREDIT RELEASE AUTHORIZATION: By signing below, the undersigned individual(s), who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Simplified Capital or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purpose of update, renewal or extension of such credit or additional credit and for reviewing or collection of the resulting account. A Photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in the above application.

_____ _____ _____
 1. Principal / Guarantor Signature 2. Principal / Guarantor Signature 3. Principal / Guarantor Signature
 Date: Date: Date:

BUSINESS CREDIT RELEASE AUTHORIZATION: I authorize all deposit, borrowing and trade account information to be released to Simplified Capital. I hereby represent all information is true, correct and complete. A Photostat or facsimile copy of this authorization shall be valid as the original.

_____ _____
 Owner/Authorized Office Signature Date