



RECIPIENT OF
PRESIDENT'S E-AWARD
FOR EXCELLENCE IN
EXPORTS

CREDIT APPLICATION

General Information:

Legal Company Name:

Company Address:

City: State: Zip Code:

Contact: Email Address:

Phone #: Fax #:

Business Start Date: Annual Company Revenues:

Fleet Size:

Personal Information of Proprietor, Partners, or Major Shareholders:

Principal Name: Title:

Date of Birth (mm/dd/yyyy): Social Security #:

Home Address:

City: State: Zip Code:

Percent of Business Owned:

2nd Applicant if Applicable:

Principal Name: Title:

Date of Birth (mm/dd/yyyy): Social Security #:

Home Address:

City: State: Zip Code:

Percent of Business Owned:



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Bank Reference:

Bank Name:

Account Number:

Person to Contact: Phone:

Equipment Finance Reference:

Purchase Information:

Equipment you want to purchase: Year: Make: Model:

Amount required to Purchase the equipment

Potentially Monthly Profit:

Terms & Conditions:

The undersigned certifies that the above information given for credit purposes is true and correct and authorizes the firm to whom this application is made, or an agent of the firm chooses to submit this application to, and any credit bureau or investigative agency to investigate the references, statements, or other data listed or accompanying this application. The undersigned authorizes all parties contacted to release credit and financial information requested as a part of said investigations.

PLEASE NOTE: No advance payments or money will be requested or collected prior to a credit approval. However, once payments are collected, if you choose not to use the firm, a refund of this money will be at the firm's discretion. By signing below, you clearly understand these terms.

REQUIRED: By typing your name below into the signature field you indicate that you agree to the terms above and have understood our PRIVACY POLICY, and your typed name below will be used as your digital signature.

I accept the Terms & Conditions.

Your digital Signature:

Please email back once complete to: credit@equipxp.com