

19613 81st Ave S, Suite A Kent, WA 98032

Business Financing Application

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Fax: 253-395-3803

	Legal Business Name					Business Phone No.			
Customer Info									
DBA * Doing Business As* (if applicable)						Fax No.			
Business Street Address	Business Street Address			City/State/Zip Code			Contact Name & Title		
			•						
Covinment Installation Loss	eties / Dishark if same as Customor's address)		City/Chata/7in Code			Contact Phone Number & Email Address			
Equipment Installation Location (check if same as Customer's address)			City/State/Zip Code			Ontact Frioric	e Number & Email Address		
				_			ars in business Years In Bus. (current owner)		
Description of Business	Description of Business						Years In Bus. (current of	owner)	
☐ Proprietorship ☐ □)	_)			ership	р			
	:	<u> </u>	<u> </u>				nip Contact Phone No.		
O him lafe	Name		Title	Title		Contac	ct Phone No.		
Ownership Info									
(Owners, partners and	ners and Home Address		City/State/Zip Code		Social	Security No.			
or principals / officers)									
	Name		Title		% Ownership	Contac	t Phone No.		
(check if more than 3 owners in the business)									
Owners in the Saciness,			City/Stata/7in Code			Cosial	Security No.		
	Home Address		City/State/Zip Code			Social Security No.			
	Name	Name		Title		ership Contact Phone No.			
	Home Address	Home Address		City/State/Zip Code		Social Security No.			
Business	Bank Name Account No.			Contact			Phone No.		
Banking									
References	Bank #2 Name	Account No.	Contact				Phone No.		
			ļ						
Equipment	Supplier Name	Sales Contact Name					Phone No.		
Supplier									
Equipment	Equipment Description						Financing Amount Requested		
Description	\$								
Each individual signing below certifies that the information provided in this credit application is accurate and complete. Each individual signing below authorizes you or any lender or funding source which may be utilized (collectively referred to as									
"Lenders") to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit requested, but also for purposes of reviewing the account, increasing the credit line on the account (if applicable), taking collection action on the account, and for any other legitimate purpose associated with the account as may be needed from time to time. Each individual signing below further									
waives any right or claim which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.									
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Signature			Signer's Printed Name			Date			
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X		O' was alla Delata	Cinnada Dintad Nama						
Signature			Signer's Printed Name				Date		
X									
Signature			Signer's Printed Name				Date		

ECOA NOTICE (TO BE RETAINED BY APPLICANT)

Thank you for your business credit application. We will review it carefully and get back to you promptly. 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 that statement, please contact us within 60 days from the date that you are notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of your request for the statement. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants 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 our compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.