

# CREDIT APPLICATION

## SUPPLIER INFORMATION



Phone: 609-424-3659

Fax: 609-424-3694

Email: [info@equipmentresourcecorp.com](mailto:info@equipmentresourcecorp.com)

## EQUIPMENT INFORMATION

Equipment Description: \_\_\_\_\_ Equipment Cost: \_\_\_\_\_

## PERSONAL INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Co. of Citizenship \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

## BUSINESS INFORMATION

Business Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Type of Business: Corporation  Proprietor  Partnership

Fax: \_\_\_\_\_ Federal Tax No.: \_\_\_\_\_

Type Of Business: \_\_\_\_\_ # Of Years In Business: \_\_\_\_\_

## BANK INFORMATION

Bank Name: \_\_\_\_\_ Account #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contact Name: \_\_\_\_\_

By signing below, the individual submitting this form, recognizing that his/her individual credit history may be a factor in the evaluating of the credit of the applicant, hereby consents to and authorizes the above named business credit provider and any assignee, lender or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now and from time to time, as may be needed in absence of this continuing consent.

*I hereby authorize our banks, Trade references, and financial institutions the right to release credit information over the phone.*

DATE:

X \_\_\_\_\_