



PO Box 462
 New Middletown Ohio 44442
 Tel: 330-549-3436

CREDIT APPLICATION

COMPANY INFORMATION

Sole Prop. Partnership LLC Corp., State _____

Legal Company Name		DBA (doing business as)	
Physical Address / Equipment Location		City, State, Zip	County
Office Phone	Office Fax	Federal Tax I.D.	Time in Business under Current Ownership Yrs. Mos.
Email Address		Type of Business:	<input type="checkbox"/> Replacement <input type="checkbox"/> Addition

OWNERSHIP INFORMATION (Must Equal 100%, If more than two owners, please write on separate sheet)

Owner 1	SSN	Title	% Ownership
Home Address	City, State, Zip		Homeowner <input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone	Cell Phone		Date of Birth
Owner 2	SSN	Title	% Ownership
Home Address	City, State, Zip		Homeowner <input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone	Cell Phone		Date of Birth
Have any of the Owners listed above ever filed for Bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes - If Yes, which Owner and what year was it filed?			

BUSINESS CHECKING & LEASE/LOAN REFERENCE

Checking Bank Name	Checking Account No.	Phone	Date Opened
Lease / Loan Reference: Name of Lender	Loan Account No.	Phone	Date of Loan
Amount Borrowed	Monthly Payment	Current Balance	Term

EQUIPMENT INFORMATION (Attached an equipment Invoice or Quote if available)

<input type="checkbox"/> New	Year / Age	Equipment Description (Make, Model, Body Type and/ or Size)	Equipment Cost	Lease Term Desired
<input type="checkbox"/> Used				
<input checked="" type="checkbox"/> Vendor / Dealer		Sales Contact	Phone	Delivery Date (Within Days)
Name: Direct Forklift		Carl Stitzel II	330-549-3436	____ Days / Now / 30 / 60 <input type="checkbox"/> Equip. in your possession

I hereby authorize the release of all credit information to and consent to the obtaining and use of my consumer credit report by any agency involved in securing funds for the above company, their designee, assigns/potential assigns at anytime, for obtaining credit and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. I understand that this information may be transmitted by us to you and by you to assign(s) for the purpose of granting to me credit, either electronically or manually and that by submitting this application, I take full responsibility for transmission thereof. I also consent to receiving unsolicited faxes and email wherein the involved agency will advocate its services. I acknowledge my rights under the Fair Credit Reporting Act and The Patriot Act which now requires two forms of Identification and Date of Birth.

Owner 1: _____ Date: _____ Owner 2: _____ Date: _____

Credit applicant has a right to a statement of the specific reasons if an adverse action has been taken. To request this information, contact us within sixty (60) days from the day you are notified of such decision. We will send you a statement of the reasons for the denial within thirty (30) days of receiving your request. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicant 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 the law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580. Rev. 8-2007



Please sign and fax completed application to