

BUSINESS Exact Legal		Phone Number				Fax		
Business Name							Number	
Billing Address				_City		State	Zip Code	
Equipment Address _				City		State	Zip Code	
Type of Business				Federal ID	#:	County	y	
	Business Age (in years)	usiness Age Years Owned b o years)Current Owner			Annual Sales		Number of Employees	
Primary Contact Name				_Phone		Ext	Fax	
Γitle	Cell			Email		Webs	ite	
Business Structure:	Proprietorship	Corporation		Partne	rship 🗌 Other			
OWNERSHIP								
Principal's Name			Title		SSN		Phone	
Home Address			City		State	Zip Code	% Ownership	
Principal's Name			Title		SSN		Phone	
Home Address			City		State	Zip Code	% Ownership	
3ank		City		State_	Contact Nam	e	Phone	
EQUIPMENT								
Equipment Description					AX Vendor	IS		
erm 🗌 24 months [☐ 36 months ☐ 44	3 months 🗌 60 m	onths		City		State	
Equipment Cost								
					Phone		Ext	
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10		Intager (Auv	antage Le	asing Col		vesligate my	credit filstory.	
Signature/T	ītle:				Date			
Signatule/1	IUC				Date			
Signature/T	ītle:				Date			
Fax or E	mail Application	on to Advanta	age+: 262	2-361-383 shon's I a	7 or kgallaghe ne, Brookfiele	er@Advantage	PlusFinancing.com	
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