



SIGN & SUBMIT VIA FAX OR EMAIL TO:

Angie Glockner
Geneva Capital LLC
f: 320.762.8402 or e: angie@gogc.com

Equipment Cost

\$

1 Business Information

| | | | | |
|--|------------------------------------|--------------------------------------|---|--|
| Legal Company Name (include dba name if applicable) | | Date Established (Current Ownership) | Type of Business (Circle one): Sole Prop. Partnership Corporation LLC Other | |
| Company Primary/Mailing Address | | City | State | Zip |
| Physical Location of Equipment - if different than above (No PO Boxes) | | City | State | Zip |
| Federal Tax ID #/ EIN (9-digits) | State Tax ID #/ Resale Permit # | Business Phone # | | Preferred Contact Method (Circle one): Office # Mobile # E-mail |
| Primary Contact Name | Office # | Mobile # | E-mail Address | |
| Own Business Location (Y/N) | Landlord Name | Landlord Telephone # | | |

* If solely owned, spousal information **is required** on credit application. If business is closely held, credit is determined based upon jointly held assets.

2 Personal Information

| | Applicant 1 | Applicant 2 | Applicant 3 |
|---|---|---|---|
| Name (First, M, Last) | | | |
| Home Street Address (No PO Boxes) | <input type="checkbox"/> Own <input type="checkbox"/> Rent | <input type="checkbox"/> Own <input type="checkbox"/> Rent | <input type="checkbox"/> Own <input type="checkbox"/> Rent |
| City, State, Zip | | | |
| Social Security # | | | |
| Date of Birth | | | |
| Mobile # | | | |
| Home Phone # | | | |
| E-mail Address | | | |
| % of Business Ownership | | | |
| Are you a US Citizen? (Y/N) | | | |
| If no, please list green card expiration date | | | |

3

Please submit a copy of your prior **3 months** bank statements (cover pages showing ending balance only) with this application.
* You may submit bank statements separately if not readily available at the time of application. However, credit decision may be pending until received.

| | | |
|--------------------------------|-------|------|
| X _____ Applicant Signature | _____ | Date |
| X _____ Applicant Signature | _____ | Date |
| X _____ Applicant Signature | _____ | Date |

Credit Release & Information Verification:

By signing this application the applicant(s) certifies that all information contained in this application, and all attachments hereto, are true and accurate to the best of the applicant(s) knowledge and are made for the purpose of obtaining credit for business purposes, and not for personal or family use. The applicant(s) hereby authorize Geneva Capital L.L.C. and its assigns to obtain and use consumer credit reports on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim the applicant(s) would otherwise have under the Fair Credit Reporting Act in absence of this continuing consent. The applicant(s) further authorize any government agency, bank or financial institution to release credit information on the applicant(s) accounts to Geneva Capital L.L.C. and its assigns. If credit is extended, Applicant agrees that submitting an electronic, photocopy or facsimile copy of a signed authorization shall be deemed to be binding, valid, genuine and authentic as an original-signature document for all purposes. The applicant(s) further authorize Geneva Capital L.L.C. to mail, fax, text or e-mail solicitations of future lease financing services to applicant.