

(for commercial purposes only)

| SIGN | & SU | BMIT | THIS | FORM | VIA FAX | OR EMAIL |
|------|------|------|------|------|---------|----------|
|      |      |      |      |      |         |          |

Geneva Capital LLC

f: 320.762.8402 or e: sales@gogc.com

JK

APPLY NOW!

COMPLETE OUR ONLINE FORM:

|             | Equipment Cost<br>\$   | uipment Description |                                    |          |      | Geneva Rep           |                |                            |  |     |
|-------------|--|---------------------|------------------------------------|----------|------|----------------------|----------------|----------------------------|--|-----|
| uo          | Legal Company Name (include dba name if applicable)                    |                     |                                    |          |      |                      |                | vpe of Busi<br>ircle one): | ness Sole Prop.   Partnership<br>Corporation   LLC   Other             |     |
| Information | Company Primary/Mailing Address  |                     |                                    |          | City |                      |                | State                      |  | Zip |
|             | Physical Location of Equipment - if different than above (No PO Boxes) |                     |                                    |          | City |                      |                | State                      |  | Zip |
| Business    | Federal Tax ID #/<br>EIN (9-digits)                                    |                     | State Tax ID #/<br>Resale Permit # |          |      | Business Phone #     |                |                            | Preferred Contact Method (Circle one):<br>Office #   Mobile #   E-mail |     |
| Bus         | Primary Contact Name   |                     | Office #                           | Mobile # |      |                      | E-mail Address |                            |  |     |
|             | Own Business Location (Y/N)  | Landlord Na         | me                                 |          |      | 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.

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

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.



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 aApplicant(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, LLC 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) accurds to Geneva Capital, LLC and its assigns. If credit is extended, Applicant agrees that submitting an electronic, photocopy or fassimile 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, LLC to mail, fax, text or e-mail solicitations of future lease financing services to Applicant(s).