

FAX to:
972-733-3885

Terms Requested

Equip / Item: _____
 Equip Price \$ _____
 Lease / Finance Term _____ Months
 Payment Amt. \$ _____ per mo.
 Sec Deposit(s) \$ _____

First Capital DataSource
Dallas, TX 75287
888-733-1763 972-733-1763

Email: FCD@airmail.net

APPLICANT COMPANY INFORMATION

Full Legal Name		d/b/a Name		Federal Tax ID #	
Company Address			City		State Zip Code
Location of Equipment (if different than above or second location)				Date Business Started	
Contact Person	Business Phone	Business Fax		E-Mail Address	
Nature of Business	Business Type: Sole-Prop, Corporation, Partnership, LLC, Other			Cell Phone or Pager (if available)	

PERSONAL INFORMATION ON ALL OWNERS, OFFICERS, PARTNERS OR GUARANTORS

1.) Name		Title	DOB	Social Security Number	% of Ownership
Home Address		City	State	Zip Code	Home Phone
2.) Name		Title	DOB	Social Security Number	% of Ownership
Home Address		City	State	Zip Code	Home Phone

BUSINESS CHECKING ACCOUNT AND SUPPLIER REFERENCES

Current Business Bank	Opening Date	Account Number(s)	Phone	Contact
Previous Bank	Opening Date	Account Number(s)	Phone	Contact
Supplier Reference	Terms	Products Purchased	Phone	Contact
Supplier Reference	Terms	Products Purchased	Phone	Contact

COMPARABLE LEASE OR LOAN AND LANDLORD REFERENCES

Lease or Loan Reference	Opening Date	Account Number(s)	Phone	Contact
Landlord	No. of Years	City / State	Phone	Contact

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes First Capital DataSource or its potential assigns to obtain from third parties information Lessor deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual as principal of and/or guarantor for the applicant, authorizes First Capital DataSource, its designee, assigns or potential assigns, to review his/her personal credit profile provided by National credit bureaus in considering this Application. A fax, email or photocopy of this authorization shall be valid as the original.

Signature	Date
Signature	Date

Please **fax** your completed credit application to FCD at **1-972-733-3885**, for credit approval. If you have questions, please **contact us** at **888-733-1763** or via email fcd@airmail.net We look forward to financing your equipment purchase and will work hard to ensure you complete satisfaction.