



Business Financing Application

Please fax to:
(253)395-3803

Administered by: Cypress Financial Corporation
Vicki Capperault (800) 433-6189 Ext: 108
(206) 774-2508 direct
19613 81st Ave South Suite A
Kent, WA 98032

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|---|-------------------------|-----------------------|---|---|-------------------------------|
| Customer Info | Legal Business Name | | Business Phone No. | | |
| DBA * Doing Business As* (if applicable) | | | Fax No. | | |
| Business Address | | City/State/Zip Code | Contact Name & Email Address (if available) | | |
| Equipment Installation Address (if different) | | City/State/Zip Code | Federal Tax ID # (if available) | | |
| Description of Business | | | Yrs In Bus (current owner) | Yrs in Business TOTAL (under ANY ownership) | |
| Proprietorship Corporation (State _____) General Partnership Limited Partnership Limited Liability Company (LLC) State or Local Government | | | | | |
| Ownership Info (Owners, partners and or principals / officers) (check if more than 2 owners in the business) | Name | | Title | | % Ownership |
| | Home Address | | City/State/Zip Code | | Social Security No |
| | Name | | Title | | % Ownership |
| | Home Address | | City/State/Zip Code | | Social Security No. |
| Banking Reference(s) | Bank Name | Account No. | Contact | Phone No. | |
| | Bank #2 Name | Account No. | Contact | Phone No. | |
| Trade References | Trade Reference #1 | Account No. | Contact | Phone No. | |
| | Trade Reference #2 | Account No. | Contact | Phone No. | |
| Equipment Supplier | Equipment Supplier Name | | Sales Contact Name | | Phone No. |
| Equipment Description | Manufacturer | Equipment Description | | | Financing Amount Requested \$ |

Each individual signing below certifies that the information provided in this credit application is accurate and complete. Each individual signing below authorizes you or any lender or funding source which may be utilized (collectively referred to as "Lenders") to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit requested, but also for purposes of reviewing the account, increasing the credit line on the account (if applicable), taking collection action on the account, and for any other legitimate purpose associated with the account as may be needed from time to time. Each individual signing below further waives any right or claim which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.

| | |
|--|--|
| X _____ Signature Signer's Printed Name Date | X _____ Signature Signer's Printed Name Date |
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Detach Here

ECOA NOTICE (TO BE RETAINED BY APPLICANT)

Thank you for your business credit application. We will review it carefully and get back to you promptly. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain that statement, please contact us within 60 days from the date that you are notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of your request for the statement. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants 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 our compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.