

# Credit Application

## Customer Information

Business Name *(correct legal name)*: \_\_\_\_\_

Trade Name *(if applicable)*: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_  
(street) (city) (county) (state) (zip)

Business Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Business Web Site Address: \_\_\_\_\_

Primary Contact Name(s): \_\_\_\_\_ Cell#: \_\_\_\_\_ Business Email Address: \_\_\_\_\_

## Business owner/officer/member/partner: *(note: If there are more than two, please copy application, fill out necessary info and sign authorization below)*

Name: \_\_\_\_\_ Soc. Sec.#: \_\_\_\_\_ Title: \_\_\_\_\_ Ownership %: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(street) (city) (county) (state) (zip)

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Soc. Sec.#: \_\_\_\_\_ Title: \_\_\_\_\_ Ownership %: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(street) (city) (county) (state) (zip)

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

## Business Information:

Business Type:*(check one)* ☐ Proprietorship ☐ Corporation ☐ LLC ☐ Partnership FED ID# \_ \_ - \_ \_ \_ \_ \_ State: \_\_\_\_\_

Industry:*(check one)* ☐ Amusement (FEC, Arcade) ☐ Amusement (Route) ☐ OCS ☐ Vending ☐ Gaming/Lottery ☐ Other: \_\_\_\_\_

Year Business Started: \_\_\_\_\_ Annual Revenues in Most Recent Year: \_\_\_\_\_ Average Split %: \_\_\_\_\_

Food/Plush/Music Costs: \_\_\_\_\_ # of locations: \_\_\_\_\_ Types of locations: \_\_\_\_\_ # Pieces of Equipment: \_\_\_\_\_

Types of Equipment: \_\_\_\_\_

How Did You Hear About Firestone? *(if an advertisement, please specify publication name)* \_\_\_\_\_

## Transaction Information:

Equipment Vendor: \_\_\_\_\_ Vendor Phone #: \_\_\_\_\_

Equipment Description *(Year, Make, Model, Serial #)*: \_\_\_\_\_

Equipment Cost: \_\_\_\_\_ Down Payment Amount *(Please specify Cash or Trade)*: \_\_\_\_\_ Term Length Requested: \_\_\_\_\_

## References: *(fill in as many that apply)*

1. \_\_\_\_\_  
(Vendor/Trade Reference) (phone #) (contact name) (years with vendor/trade) (current balance)

\_\_\_\_\_  
(Vendor/Trade Reference) (phone #) (contact name) (years with vendor/trade) (current balance)

\_\_\_\_\_  
(Vendor/Trade reference) (phone #) (contact name) (years with vendor/trade) (current balance)

2. \_\_\_\_\_  
(Business Checking Account) (phone #) (contact name) (account #) (city/state)

3. \_\_\_\_\_  
(Loan Reference) (phone #) (contact name) (loan/lease #) (current balance) (monthly pmt)

I submit the information hereof is true and complete, and I agree to furnish financial statements from time to time as you may request, and promptly notify you of changes in my financial circumstances. Authorization is given by signature(s) below for Firestone Financial Corp. to inquire about credit experience of above bank and trade references and to make inquiries of credit reporting agencies and authority is granted for stated references and credit reporting agencies to furnish this information. Further, I authorize Firestone to contact me via auto-phone/text messaging in order to communicate important information.

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 the statement, please contact Firestone Financial Corp. within 60 days from the day you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

NOTICE: The 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): familial status, sexual orientation, ancestry, handicap or whether or not all or part of the person's income derives from any public assistance program: or whether the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is Federal Deposit Insurance Corporation, 15 Braintree Hill Office Park, Braintree, MA 02184. The state agency that administers compliance with the state law is Massachusetts Commission Against Discrimination, One Ashburton Place, Boston, MA 02108.

Signed by Applicant: \_\_\_\_\_

Signed by Applicant: \_\_\_\_\_

