Business Credit Application

Please return application to:

Beacon Funding Corporation, 3400 Dundee Road, Suite 180, Northbrook, IL 60062

beaconfuncting equipment financing solutions

T 800.866.6396 F 847.291.3414 www.beaconfunding.com

BUSINESS INFORMATION FULL LEGAL NAME (INCLUDE DBA IF APPLICABLE)					TELEPHONE FACSIMILE				
BILLING STREET ADDRESS			CITY		COUNTY	STATE		ZIP	
EQUIPMENT LOCATION (IF DIFFERENT FROM ABOVE) STREET ADDRESS			СІТҮ		COUNTY	STATE		ZIP	
PROPRIETORSHIP PARTNERSHIP CORPORATION LLC LLP TAX ID #									
BUSINESS START DATE (MM/YYYY) INDUST	RY START DATE (MM/YYYY)	BUSINESS	DESCRIPTION		SALES LAST YEAR	PROJ. NEXT YEAR		ΕΩυΙΤΥ	
LANDLORD/MORTGAGOR NAME			TELEPHONE						
PERSON SIGNING DOCUMENTATION	TITLE					BUSINESS LICENSE?			
HOW DID YOU LEARN ABOUT US?			WEB ADDRESS				AGERO PF	AGERO PROVIDER #	
OWNER INFORMATION			SOCIAL SECURITY #		HOME TELEPHONE		MOBILE TELEPHONE		
HOME STREET ADDRESS		CITY			STATE			ZIP	
OWNS HOME?	VALUE	VALUE		MORTGAGE		W-2 LAST YEA		EAR	
CONTINUE EMPLOYMENT?	SPOUSE W-2	SPOUSE W-2		IESS OWNED EMAIL					
CO-APPLICANT		SOCIAL SECURITY #		HOME TELEPHONE MC		MOBILE T	ELEPHONE		
HOME STREET ADDRESS			CITY		STATE		-1	ZIP	
OWNS HOME?	VALUE			MORTGAGE	W-2 LAST YEAR		FAR	<u> </u>	
CONTINUE EMPLOYMENT?	SPOUSE W-2		% BUSINESS OWNED	EMAIL					
EQUIPMENT TO BE ACQUIRED TOTAL ESTIMATED EQUIPMENT COST EQUIPMENT DESCRIPTION (MFR/MODEL)									
SUPPLIER COMPANY NAME		SUPPLIER SALESPERSON		TELEPHONE	TELEPHONE				
TARGET FINANCING TERMS				TERM (# MONTHS)	TERM (# MONTHS)		MONTHLY PAYMENT		
ADDITIONAL COLLATERAL									
BANK REFERENCES BUSINESS DE	CITY/STATE		TELEPHONE						
CHECKING ACCOUNT #		BALANCE			CONTACT NAME	I		SINCE	
BUSINESS LOAN/LEASE			CITY/STATE		TELEPHONE			I	
LOAN/LEASE #			BALANCE		CONTACT NAME			SINCE	
BUSINESS LOAN/LEASE		CITY/STATE		TELEPHONE					
LOAN/LEASE #			BALANCE		CONTACT NAME			SINCE	
		CITY/STATE		ACCT #	TELEPHONE			CONTACT NAME	
1.									
2.									
3.									
The applicant(s) certify that all information contained in this application, and all attachments hereto, are true and complete 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 authorizes Beacon Funding and any assignee, lender or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now, from time to time, and at any time in the future, 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 authorizes any bank, financial institution or trade reference to release credit information on the applicant(s) account(s) to Beacon Funding and/or its assigns. If applicable, applicant hereby authorizes Agero to share with Beacon Funding pertinent relationship and activity information relating to applicant's Agero relationship. The applicant(s) hereby authorizes Beacon Funding pertinent activity information relating to applicant's extra credit evaluations made within the 4506-T 'Signature of taxpayer(s)'' section are true and accurate. An electronic, photocopy or facsimile copy of this authorization with a copied, electronic or facsimile signature shall be deemed to be binding, valid, genuine and authentic as an original-signature document for all purposes. A non-refundable documentation fee will be required for the preparation and distribution of contract documents.									
SIGNATURE X APPLICANT DATE X CO-APPLICANT DATE									

