

High Falls Funding LLC - Commercial Credit & Leasing Application

BUSINESS INFORMATION

EXACT LEGAL NAME OF BUSINESS ENTITY			TELEPHONE NUMBER	
ADDRESS (STREET)		(CITY)	(STATE)	(COUNTY) (ZIP CODE)
NATURE OF BUSINESS	FAX NUMBER		FED. TAX NO.	
WEBSITE ADDRESS	NUMBER OF YEARS IN BUSINESS		YEARS UNDER PRESENT CONTROL	

OWNERSHIP INFORMATION

BUSINESS STRUCTURE <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> S-CORP <input type="checkbox"/> C-CORP <input type="checkbox"/> LLP <input type="checkbox"/> LLC <input type="checkbox"/> TRUST					
PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.
HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT DRIVER'S LIC. NO.
ANNUAL SALARY \$	EST. NET WORTH \$	EMAIL ADDRESS			
PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.
HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT DRIVER'S LIC. NO.
ANNUAL SALARY \$	EST. NET WORTH \$	EMAIL ADDRESS			

NON - AGRICULTURAL TRANSACTIONS

TOTAL ASSETS: \$	TOTAL LIABILITIES: \$	GROSS ANNUAL INCOME: \$	NET ANNUAL INCOME: \$
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AGRICULTURAL TRANSACTIONS

YEAR BEGAN FARMING/AG BUSINESS	YEARS AT CURRENT ADDRESS:	GROSS NON-AG INCOME: \$	GROSS FARM/AG INCOME	NET-FARM/AG INCOME; \$
TOTAL ASSETS: \$	TOTAL LIABILITIES: \$	NET NON-FARM INCOME \$	ANNUAL LEASE PAYMENT OBLIGATIONS, NOT REFLECTED IN TOTAL LIABILITIES: \$	

BANK INFORMATION

BANK	BRANCH	FAX NUMBER	TELEPHONE NUMBER
CURRENT CHECKING ACCT BALANCE \$	CHECKING ACCOUNT NUMBER(S)	LOAN(S) ORIGINAL BALANCE \$	LOAN(S) CURRENT BALANCE \$

CREDIT REFERENCES (EQUIPMENT FINANCING)

COMPANY NAME	ACCOUNT NUMBER	TELEPHONE NUMBER	CONTACT PERSON

EQUIPMENT AND SUPPLIER/VENDOR INFORMATION (ATTACH INVOICES/SPEC SHEETS)

VENDOR		CONTACT PERSON	TELEPHONE NUMBER
ADDRESS (STREET)		(CITY)	(STATE) (ZIP CODE)
EQUIPMENT DESCRIPTION			
COST OF EQUIPMENT \$	REQUESTED TERMS		EXPECTED DELIVERY DATE
LOCATION OF EQUIPMENT, IF DIFFERENT THAN ABOVE (STREET)		(CITY)	(STATE) (COUNTY) (ZIP CODE)
LEGAL DESCRIPTION, ALONG WITH RECORD OWNER FOR LOCATION OF NON - MOBILE EQUIPMENT:			COUNTY STATE

I (We) certify that the information provided is correct to the best of my (our) knowledge. I (We) understand that I (We) may be required to supply additional information and to provide security for the requested financing. In conjunction with this application. I (We) agree and consent that dealer/broker/lender/lessor may obtain a credit report or and any other information relating to my (our) financial position. Any person or firm is hereby authorized to provide such information requested by dealer/broker/lender/lessor.

X	DATE:	X	DATE:
PRINTED NAME AND TITLE:		PRINTED NAME AND TITLE:	