



One-Page Credit Application for Chicago® Financing Assistance

Borrower/Lessee

Legal Company Name: _____

DBA: _____ Fed Tax ID: _____

State of Incorporation/Organization: _____ D&B #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Contact: _____ Cell Phone: _____

E-mail: _____ Fax: _____

Time in Business: _____

Type of Business: Partnership Proprietorship
 Corporation LLC

*** Please include a copy of your finalized sales order

Chicago® Distributor

Company Name: _____

Sales Rep: _____

Phone: _____

Equipment Location

Address: _____

City: _____ State: _____ Zip: _____

Own Building Rent Building

Landlord: _____ Phone: _____

Bank Information

Principal Bank: _____

Contact: _____ Phone: _____

*** Please include 3 months most recent bank statements

Principal Information (100% Ownership Required - Please Use Additional Pages If Necessary)

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

SSN: _____ %Ownership: _____

Annual Income: _____ Source/Occupation: _____

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

SSN: _____ %Ownership: _____

Annual Income: _____ Source/Occupation: _____

Trade References and Insurance Information

Company Name: _____

Contact: _____ Phone: _____

Company Name: _____

Contact: _____ Phone: _____

Insurance Agency Name: _____

Contact: _____ Phone: _____

Proposed Finance Terms

Requested Term in Months: 12 24 36 48 60 Other: _____ Requested Finance Type: Loan Lease

I hereby represent all information is true, correct and complete. I/we hereby authorize the release of any credit information, business or personal to the submitter, its assigns, or the above distributor of Chicago® or its assigns. Submitter complies with section 326 of the USA PATRIOT Act. This law mandates that submitter or its assigns request and verifies certain information about you and your company. A copy or fax of this authorization shall be deemed valid as the original.

Signature: _____ Title: _____ Date: _____

Please Print Name: _____

Signature: _____ Title: _____ Date: _____

Please Print Name: _____