



BAKERY & RESTAURANT EQUIPMENT FINANCING

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			
PRINCIPAL'S NAME	TITLE	% OWNERSHIP	SOC. SEC. NO.	
PRINCIPAL'S NAME	TITLE	% OWNERSHIP	SOC. SEC. NO.	

BANK INFORMATION

BANK		CHECKING ACCOUNT(S):
PHONE NUMBER	FAX NUMBER	CONTACT

EQUIPMENT AND VENDOR INFORMATION

VENDOR/SELLER www.bakeryequipmentclassifieds.com	CONTACT PERSON Brent Bulow	PHONE NUMBER 507-250-3395	LEASE TERM
EQUIPMENT DESCRIPTION			
TOTAL COST OF EQUIPMENT	NEW/USED (IF USED, HOW OLD)	EXPECTED DELIVERY DATE	
LOCATION OF EQUIPMENT, IF DIFFERENT THAN ABOVE (STREET)	(CITY)	(STATE)	(COUNTY) (ZIP CODE)

By signing below, each undersigned individuals(s), who is either a principle of the credit applicant listed below or a personal guarantor of its obligations, provides written instruction to Lessor or its designee (and any assignee or potential assignee thereof) authorizing review of his or his personal credit profile from a national credit bureau. Such a authorization shall extend to obtaining a credit profile in considering the application of the credit applicant and subsequently for the purpose of update renewal or extension of such credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be as valid as the original. In addition to authorizing review of my/our credit profile from any national credit bureau the undersigned also authorizes my/our financial institutions and creditors to release credit information required by Lessor or its designee (and any assignee or potential assignee thereof).

X

MEMBER SIGNATURE

DATE

**Please Complete and Fax to 714-415-7821 Attention: Rick Thome
VNDR ID: BEC 3395**