



**CREDIT APPLICATION**

**COMPANY INFORMATION**

COMPANY NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_ CITY / STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

BUSINESS TELEPHONE: \_\_\_\_\_ BUSINESS FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_ FED TAX ID# \_\_\_\_\_

TYPE OF BUSINESS: CORPORATION [ ] PARTNERSHIP [ ] SOLE-PROP [ ] NON-PROFIT [ ]

YEARS IN BUSINESS: \_\_\_\_\_

NATURE OF BUSINESS: \_\_\_\_\_

**PERSONAL INFORMATION ON OFFICERS, PARTNERS, OR GUARANTORS**

NAME: \_\_\_\_\_ TITLE \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_ % OWNERSHIP \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY, STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ DO YOU OWN OR RENT YOUR CURRENT RESIDENCE?  
( ) [ ] OWN [ ] RENT

NAME: \_\_\_\_\_ TITLE \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_ % OWNERSHIP \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY, STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ DO YOU OWN OR RENT YOUR CURRENT RESIDENCE?  
( ) [ ] OWN [ ] RENT

**COMPANY BANK STATEMENTS**

Proving bank statements is not always a requirement of the credit application process but can have a significant impact on the approval process and payment. If requested, would you be willing to supply bank statements? [ ] YES [ ] NO

PLEASE EMAIL OR FAX YOUR LAST 3 MONTHS BANK STATEMENTS TO: credit@paramountfinancial.com or 480-222-0312

**DECLARATION / AUTHORIZATION**

The undersign agrees that the information provided above, together with any financial statements, schedules, or other materials provided to Paramount Financial Services, LLC, "PFS" is true, correct, and complete. The undersigned authorizes PFS to obtain the credit history of the undersigned and the officers and principals of the company and to investigate (directly or indirectly) such credit history from any source for the purpose of entering into an agreement or for servicing such agreement.

APPLICANT: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

**EQUIPMENT INFORMATION**

SALES CONTACT \_\_\_\_\_

EQUIPMENT DESCRIPTION \_\_\_\_\_ EQUIPMENT COST \_\_\_\_\_

**\*\* PLEASE FAX COMPLETED APPLICATION TO: 480-222-0312 \*\***



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