



CREDIT APPLICATION

Fax completed and signed application to: **925-837-2268**
 or Email to: info@capxfunding.com

Website: www.capxfunding.com
 Questions? Please call **866-914-2279**

Customer Information

Legal Company Name	Contact Person	Phone #	
Address	City, State, Zip	Fax #	
Location of Equipment (if different from above)	City, State Zip	Email Address	
Federal Tax ID#	Type of Business	Number of Employees	
Choose one: C-Corp___ S-Corp___ LLC___ Proprietorship ___ Partnership ___		Year Company Started	# Years Owned

Equipment Information

Supplier/Vendor/Dealer	Representative	Representative's Phone #
Equipment Description	Equipment Cost	Sales Tax Rate for <u>Equipment Location</u>
New _____ or Used _____ Year _____	Requested Term _____ months	Business Facilities Owner & Phone #

Reference Data

List present bank(s). Previous bank is required if applicant has been at present bank less than two years.

Present Bank		Finance/Leasing Reference	
Branch	Phone	Location	Phone
Bank Contact	Account Number	Contact	Account Number

Trade References

Name and Address	Phone	Contact Name
1.		
2.		

Personal Data for All Owners and Guarantors

(attach separate application for additional Owners and Guarantors)

Name	Title	Ownership %	Date of Birth
Home Address <input type="checkbox"/> Own <input type="checkbox"/> Rent	City, State Zip	Social Security Number	
Name (attach additional owners/guarantors)	Title	Ownership %	Date of Birth
Home Address <input type="checkbox"/> Own <input type="checkbox"/> Rent	City, State Zip	Social Security Number	

Credit Authorization: I/We hereby authorize CapX Funding Corp., its designee, assigns or potential assigns to review my/our personal credit profile provided by national credit bureaus in considering this application and for the purpose of updating, renewing, extending additional credit or the collection of any late account. I/We hereby authorize our references to release all credit information and I/We represent and warrant that the information submitted herein is true, complete and accurate. I/We also agree to furnish financial statements and/or tax returns upon request. A facsimile, electronic or other copy of this authorization shall be as valid as the original.

X _____ Title _____ Date _____
 X _____ Title _____ Date _____