

## Satisfying All Your Lifting Needs.

## **Equipment Finance Application**

| <u>business imormation</u>                                    |   |  | Trefsorial Checking Dusiness Loans        |                    |                  |               |
|---|---|--|---|--------------------|------------------|---------------|
| Are you a Moley Magnetics INC Customer ? Check all that apply |   |  | ☐ Business Checking ☐ Other               |                    |                  |               |
| Business Legal Name   | Federal Tax ID                              |  | Entity(Sole prop, Partnership, LLC, etc.) |                    |                  |               |
| DBA (if any)  | Primary Contact                             |  |   | Title              |                  |               |
| Business Phone  | Cell Phone                                  | Home Phone                                       | •   | Fax                | E-mail           | Address       |
| Business Street Address                                       | City, State, Zip                            | ſ  | Business Mailing Ad                       | dress              | City, S          | tate, Zip     |
| Date Business Started   | Years Under Current                         | Years Under Current Ownership Nature of Business |   |                    |                  |               |
| Primary Bank  | Phone #                                     |  |   | Checking Account # |                  |               |
| Other Business Loan/ Lease (Company)                          | Account                                     | #  | Phone #                                   |                    | Contact Name     |               |
| Insurance Agent   |   |  | Phone#                                    |                    |                  |               |
| <b>Equipment Information</b>                                  |   |  |   |                    |                  |               |
| Equipment Description   | Estimate Equipment Cost Expected Delivery I |  | ate Equipment Type(new or used)           |                    |                  |               |
| Vendor Name   | Vendor Contact                              | t  | Vendor Phone #                            |                    | Vendor Address   |               |
| Equiment Location   |   |  |   |                    |                  |               |
| Principal Information   |   |  |   |                    |                  |               |
| Principal Name (1)  | Principal Title                             |  | Home Address                              |                    | City, State, Zip | Date of Birth |
| Phone #   | Percent of Owr                              | nership  | SS #                                      |                    | Signature        |               |
| Principal Name (2)  | Principal Title                             |  | Home Address                              |                    | City, State, Zip | Date of Birth |
| Phone #   | Percent of Owr                              | nership  | SS #                                      |                    | Signature        |               |
| For Office Use Only   |   |  |   |                    |                  |               |
|   |   |  |   |                    |                  |               |

Each individual signing as principal certifies that the information provided is accurate and complete. Each individual signing as principal authorizes lender or any other lending sources to obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit requested us las for purposes of reviewing the account, increasing credit line, taking collection action on the account and for any other legitimate purpose associated with the account as needed. Customer(s) further authorizes banks, trade references, and financial institutions the right to release information to us. IMPORTANT NEW CUSTOMER INFORMATION: to help the government fight the funding of terrorism and money laundering activities, Federal law requires financial institutions to obtain, verify and record identifying information on new customers. The personal data requested above will allow us to identify each person signing this application. We may also ask for copies of drivers' licenses or other idenses or

Phone

Branch #

Preferred ID

ECOA Notice (to be retained by applicant(s) Thank you for your business credit application. We will review it carefully and get back to you promptly. If your application for business credit is denied, you have the right to a written statement of the specific reasons for that denial. To obtain that statement, please write to us at: 4922 IDA Park Drive Lockport NY 14094 within 60 days from the date that you were notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of your request for the statement. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter the binding contract), because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

Banker