

Credit Application (attach additional pages if necessary)								
Equipment or other item being leased or acquired with loan proceeds:							Cash price:	
			L	Nev			\$	
End-of-term purchase option (applies to leases or ☐ None ☐ \$1.00 ☐ Fair Market Value ☐	**	□ 10% "	Put"	T	erm of lease of months		Periodic \$	payment amount:
				1 '				
Advance payment (if any): \$ Security deposit (if any): \$ Applicant (If a corporation, LLC, LP or other organization, use EXACT registered name):				Rate factor (if lease): Phone Number: Fax Number:				
Applicant (if a corporation, ELO, Er of other organization, use EXACT registered name).				() -			() -
Applicant's "d/b/a" name, if any:				Contact Person's Cell Number: () -			Conta	act's E-Mail Address:
Applicant's chief executive (main business) office address:				County:			In Bus	siness Since:
Proposed location/address of equipment/property:				County:				
General description of Applicant's business:								
Corporation Limited Liability Co. Limited Partnership General Partnership Sole Proprietorship Other (List)								
State of Organization/Registration: State Or	genizational ID #:	Federal Tax ID			Dun & Bradstreet N			
State of Organization/Registration: State Or	rganization/Registration: State Organizational ID #: Federal Tax II			. Dun & bradstreet Number.				
Bank References:					•			
Bank Name (two year history): Account Number(s):								
Bank officer to contact:			ne Numbe	ne Number: Other			r Account(s):	
Personal Data – Proprietors, Corporate Officers, Partners, General Partner (if a person), LLC Managing Members (if a person):								
To help the government fight the funding of terrorism and money laundering activities, U.S. Federal law requires financial institutions to obtain, verify and record information that identifies each person (individuals or businesses) who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying								
documents. Name	Work Title			Home Telephone				Date of Birth
Home Address	City	State	County			Zip Code)	Social Security Number
ame Work Title				Home Telephone				Date of Birth
Home Address	City	State	County			Zip Code)	Social Security Number
Signature: X	Date:	Date: Signa		ıre: X			Date:	
Signature: X	ignature: X Date: Signa		Signature	Χ				Date:
THE ABOVE SIGNED CERTIFIES THAT THE INFORMATION CONTAINED IN THIS FINANCING APPLICATION IS TRUE AND CORRECT AND								

THE ABOVE SIGNED CERTIFIES THAT THE INFORMATION CONTAINED IN THIS FINANCING APPLICATION IS TRUE AND CORRECT AND AUTHORIZES PERSON TO WHOM THIS APPLICATION IS MADE AND ANY CREDIT BUREAU OR INVESTIGATIVE AGENCY TO INVESTIGATE THE INFORMATION CONTAINED WITHIN THIS APPLICATION AND OBTAIN INFORMATION ABOUT THE ABOVE SIGNED'S ACCOUNTS AND CREDIT EXPERIENCE. THE ABOVE SIGNED AUTHORIZES ALL PARTIES CONTACTED TO RELEASE CREDIT AND FINANCIAL INFORMATION REQUESTED AS A PART OF SAID INVESTIGATION. DIGITAL IMAGING SYSTEMS OR PERSON TO WHOM THIS APPLICATION IS MADE, MAY ALSO DISCLOSE INFORMATION ABOUT THE UNDERSIGNED TO OTHER LENDERS AND CREDIT BUREAUS AND OTHER PERSONS INCLUDING ENTITIES AFFILIATED AND ASSOCIATED WITH DIGITAL IMAGING SYSTEMS. THIS SHALL BE CONTINUING AUTHORIZATION FOR ALL PRESENT AND FUTURE INQUIRIES AND DISCLOSURES OF ACCOUNT INFORMATION AND CREDIT EXPERIENCE ON THE UNDERSIGNED DIGITAL IMAGING SYSTEMS,. ITS AFFILIATES AND SUBSIDIARIES OR PERSON TO WHOM THIS APPLICATION IS MADE OR ANY PERSON REQUESTED TO RELEASE SUCH INFORMATION.