

# New Lock Capital Credit Application

Application Date: \_\_\_\_\_  
Sales Representative: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

## COMPANY INFORMATION

Full Legal Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Equipment Location (if different from above): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_ Federal Tax ID#: \_\_\_\_\_ Nature of Business: \_\_\_\_\_

Please Check: ☐ Corporation ☐ General Partnership ☐ Limited Partnership ☐ Sole Proprietorship ☐ Non-Profit ☐ LLC ☐ State or Local Government

STATE or JURISDICTION OF INCORPORATION / ORGANIZATION: \_\_\_\_\_

OTHER LOCATIONS (attach additional sheets if necessary): \_\_\_\_\_

Principal/Partner/Officer: \_\_\_\_\_

Complete Home Address: \_\_\_\_\_

Home Phone#: \_\_\_\_\_ Social Security#: \_\_\_\_\_ % Ownership: \_\_\_\_\_ DOB: \_\_\_\_\_ **X**  
By signing, you authorize us to investigate your credit as provided below

Principal/Partner/Officer: \_\_\_\_\_

Complete Home Address: \_\_\_\_\_

Home Phone#: \_\_\_\_\_ Social Security#: \_\_\_\_\_ % Ownership: \_\_\_\_\_ DOB: \_\_\_\_\_ **X**  
By signing, you authorize us to investigate your credit as provided below

## EQUIPMENT INFORMATION

Supplier Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Lease Term (Months): \_\_\_\_\_ Estimated Equipment Cost: \_\_\_\_\_ Equipment Description: \_\_\_\_\_

End of Lease Purchase Option: ☐ Fair Market Value ☐ \$1.00 Out ☐ \_\_\_\_ % of Total Cash Price ☐ Other: \_\_\_\_\_

## TRADE REFERENCES

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

## BANK REFERENCES

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bank Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Account Number(s): \_\_\_\_\_

## BUSINESS PURPOSE

You, the credit applicant, certify to us that you are applying for credit for a business purpose, and not for personal, family, or household purposes, and that the information you provided is true and correct.

**USA PATRIOT ACT NOTIFICATION – The following notification is being provided to you pursuant to Part 326 of the USA Patriot Act of 2001, 31 CFR 103.121(b)(5):**

### IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, including any deposit account, loan, lease, or extension of credit, 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.

### ECOA Notice

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Credit Disclosure Administrator VFS LLC 5827 Terex Ave Clarkston, MI 48346 Phone (248)-647-4600 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a 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.

## RELEASE & AUTHORIZATION

To Whom It May Concern: I authorize and request you to release information concerning my personal or business credit standing for this Credit Application, any renewals or future extensions of credit, or for review or collection of any resulting account. I authorize VFS to share any such credit reports with its affiliates, assignees and potential funding partners.

Authorized Signature: **X** \_\_\_\_\_ Name and Title: \_\_\_\_\_ Date: \_\_\_\_\_

