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|  | **Email or Mail Application to:**  Accolade Capital Finance LLC  6545 Market Ave., North STE 100  North Canton, OH 44721  Ian Joyce  Senior Analyst  [ijoyce@accoladecapital.com](mailto:ijoyce@accoladecapital.com) |

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| LESSEE COMPANY INFORMATION | | | | | | | | | |
| Company Name: | | | | | E-mail: | | | | |
| Company Address: | | | City: | | State: | | | Zip: | |
| Signer: | | | Title: | | Tel #: | | | State Corp. Filing # | |
| Type of Business: Non-Profit Proprietorship Partnership Corporation | | | Number of Years  in Business: | | Fax #: | | | Annual Sales: | |
| PERSONAL INFORMATION ON OFFICERS, PARTNERS OR GUARANTORS | | | | | | | | | |
| Name: | | Title: | | SSN: | | | % Ownership: | | |
| Home Address: | | City/State: | | Zip: | | | Cell Phone: | | |
| Name: | | Title: | | SSN: | | | % Ownership: | | |
| Home Address: | | City/State: | | Zip: | | | Cell Phone: | | |
| REFERENCES | | | | | | | | | |
| Bank Name: | | Account #: | | Phone: | | | Contact: | | |
| Bank Name: | | Account #: | | Phone: | | | Contact: | | |
| Finance Company Name: | | Account #: | | Phone: | | | Contact: | | |
| Finance Company Name: | | Account #: | | Phone: | | | Contact: | | |
| Insurance Name: | | Account #: | | Phone: | | | Contact: | | |
| DECLARATION | | | | | | | | | |
| **This application may be executed by facsimile signature(s). Delivery of this application bearing a facsimile signature(s) shall have the same force and effect as if the application bore an inked original signature(s).** The above information, together with any accompanying financial statements, schedules, or other materials, is submitted for the purpose of obtaining credit and is warranted to be true, correct and complete. The undersigned hereby warrants that any individual identified above who is either a principal, a personal guarantor or a sole proprietor of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, has provided his/her written authorization for inquiry into their credit worthiness, including but not limited to obtaining a consumer credit report, and shall hold Patriot Equipment Finance and its assignees, agents or nominees harmless from same. You understand that such investigation may include seeking information as to the background, credit and financial responsibility of your officers and principals (or any of them). 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 or age (provided the applicant has the capacity to enter into 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. If for any reason 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 write to Patriot Equipment Finance, LLC @ 13702 Pearl Rd., Strongsville, OH 44136 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial of credit within 30 days of receiving your request for the statement. | | | | | | | | | |
| Applicant: | Signature: \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | Title: | | | Date: |
| Applicant: | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | Title: | | | Date: |