TCF Equipment Finance Credit Application

Contact 800.442.7811 | Fax: 952.656.5081 | email: tow@tcfef.com





11100 Wayzata Blvd., #801, Minnetonka, MN 55305 | Website: www.tcfef.com

Company Information												
Company Name OR Individual Last, First and Middle Name, Suffix							DBA					
Street Address				City	City				State/Z	Zip		
none Fax							Website					
Contact Name	Contact Email Address				State Organization ID #		Federal ID #			Fleet Size		
Business Structure Sole C Corp Sub S Corp LLP LLC		State of Incorporation		Date Established		Yrs in Business (Present Owners		rship)	hip) Nature of Business			
Owners, Partners and Guaran	tors Infor	mati	on (Attach	separa	te sheet	if ne	cess	ary)				
Name (Personal Guarantor/Principal/Partner/Officer)		Title		Percent Owned		Social Security #				Owner Since:		
ddress		City		State/Zip			Phone		Date of Birth			
Name (Personal Guarantor/Principal/Partner/Officer)			Title		Percent Owned			Social Security #		Owner Since:		
Address			City		State/Zip			Phone			Date of Birth	
Equipment and Vendor Infor	mation (A	ttach	separate s	heet if	necessar	ry)						
Finance Structure			Total Amount Finan		Equipment is				Equipment is			
TRAC \$1 OUT/LP EFA Loan				Additional-Re		ason		Replacement-Payment				
Manufacturer/Year/Make/Model				Qty	Equipment C	Cost	Т	otal Equipment Cost		Delivery Dat	te	
Vendor Name Conta		act Name		Contact Phone #				Contact Email Address				
Primary Sources of Business												
Company Name	Products/Supplies			Contact Na	t Name		Contact Phone #		Contact Email Address			
Company Name	Products/Supplies	5		Contact Na	Name		Contact Phone #		Contact Email Address			
References												
Business Bank Name	Contact Name			Contact Pho		ne C		Checking Acct. #		Lease/Loan Acct. #		
Finance Company	Contact Name		Contac		hone		Checking Acct. #		Lease/Loan		an Acct. #	
By submitting this Application, the undersigned warrants that the applications under credit reports, investigate references and statements, and main another financial, credit and other information about the applicant and any material change in any information; (d) this Application is submittuited States; and (f) this Application will apply to any future request commitments to extend credit except in final signed documents and, in READ CAREFULLY BEFORE SUBMITTING THIS APPLICAT	ke other credit inquiries such individuals and us ed in connection with fi for additional financing limited circumstances, ION: We recommend	about the ap e shared info inancing solo and all noti- in and pursu	oplicant and all such indivi- ormation to market to the a ely for business and commi- ces, disclosures, consents a nant to the terms and condi- t the Application, sign it but	iduals, and anyb applicant and the ercial purposes a and warranties sl tions of written elow and fax or	ody contacted in con- e individuals; (c) the i and NOT for persona hall be deemed repea commitment letters.	information al, family o ated for eac Term sheet ddress set f	or nor according to the second of the second	y release any credit and fir ompanying this Application d purposes; (e) the application quest, unless the applicant l letters, approval letters and If you send this Application	nancial infor on is true and nt, if an indi submits a no nd the like a	mation; (b) TCFI d complete, and the ividual, is a citize ew written applicate not commitment crypted and non-s	EF and its affiliates may share with one he undersigned will notify TCFEF of or or lawful permanent resident of the cation. TCFEF does not make offers or ent letters.	
non-public information may be at risk, and we are not responsible for the security of the contents or for any theft or loss of data during e-mail tr your name and submitting this Application to us, you agree that this Application is an electronic record executed by you using your electronic s Signature/Title							e the risk of	f submitting this Applicati	on by e-mail	l, enter your name	e as authorized agent below. By entering	
Signature, Title												
Signature/Title							Date					

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, 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.

EQUAL CREDIT OPPORTUNITY ACT. 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 our Customer Service Manager, 11100 Wayzata Blvd., Suite 801, Minnetonka, MN 55305 (866-311-2755) 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. NOTICE: 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. The federal agency that administers compliance with this law concerning this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006 and the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

(Please retain a copy of this notice and application for your records, updated 12/12)