TCF Equipment Finance Credit Application

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Website: www.tcfef.com

Company Information											
Company Name OR Individual Last, First and Middle Name, Suffix						DBA					
Street Address							State/Zip				
Phone		Fax		Website				Gross Annual Revenue			venue
Contact Name Contact E		Email Address				State Organization ID #			Federal ID #		
		le:								(0.1	
Business Structure		State of Incorpo	State of incorporation Da		te Established		Yrs in Business (Present Ownershi		hip) Nature of Business		
Prop C Corp Sub S Corp	LLP LLC										
Equipment Location (if different from above)											
		(8	•				•				
Owners, Partners and Guaran	tors Inform	ation (Attac	:h separ	ate shee	et if ne	ecessa	iry)				
Name (Personal Guarantor/Principal/Partner/Officer)		Title	Title		Percent Owned		Social Security #			Owner Since:	
Address		City		State/Zip		Phone				Date of Birth	
Name (Personal Guarantor/Principal/Partner/Officer)		Title		Percent Owned		Social Security #				Owner Since:	
		- Isi								D : (D) :1	
Address	City	City		State/Zip		Phone		Date of Birth			
Payment Plan, Equipment and	d Vendor In	formation (Attach s	separate	snee	t if ne	cessary)				
Term Options (months) Finance Structure								To	tal Amount Fi	inanced	
24 36 48 60	FMV	10% PUT	\$1 OUT		urchase	ш.	V or %				
Manufacturer/Year/Make/Model			Qty		Equipment Cost		Total Equipment Cost		Delivery Date		
							l-				
Vendor Name	Contact Name	act Name		Contact Phone #				Contact Fax #			
Vendor Address								ontost En	nail Address		
venuoi Audress								Ontact Li	CLITIALI Address		
Deference (2 years History)											
References (2 year History)											
Business Bank Name Contact Name			Contact Phone			e			Contact Email		
Figure Course				DI			Contact Email				
Finance Company Contact Name			Contact Phone			ie			Contact Linan		
By submitting this Application, the undersigned warrants that the ap	nlicent and each individual	Listed as a principal parte	ar owner more	ntar ar abligar cons	ant authoriz	a and warrar	at as follows: (a) TCE Eq	uinmant Fi	inanca a divisio	on of TCE National Bank	and its agents
("TCFEF") may obtain commercial and consumer credit reports, invinformation; (b) TCFEF and its affiliates may share with one another	estigate references and stat	tements, and make other c	redit inquiries abo	out the applicant an	d all such inc	dividuals, an	d anybody contacted in c	onnection	therewith may r	release any credit and fina	ncial
Application is true and complete, and the undersigned will notify To purposes; (e) the applicant, if an individual, is a citizen or lawful per	CFEF of any material chang	ge in any information; (d)	this Application is	s submitted in conn	ection with f	inancing sol	ely for business and com	mercial pu	rposes and NOT	Γ for personal, family or l	nousehold
future request, unless the applicant submits a new written application. Term sheets, proposal letters, approval letters and the like are not contain the same of t		ffers or commitments to ex	xtend credit excep	pt in final signed do	ocuments and	, in limited o	circumstances, in and pur	suant to the	e terms and con-	ditions of written commit	ment letters.
READ CAREFULLY BEFORE SUBMITTING THIS APPLIC											
including non-public information may be at risk, and we are not resp agent below. By entering your name and submitting this Application							assume the fisk of subm	mang this A	ърричанов ву е		auutorized
Signature/Title						Date					
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 content;) because all or part of the applicants 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 the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006.

(Please retain a copy of this notice and application for your records, updated 6/15)