



**EQUIPMENT FINANCING APPLICATION**

1161 Broad Street, Suite 214

Shrewsbury, NJ 07702

Phone: (800) 542-7467

Phone: (732) 389-7500

Fax: (732) 389-7505

Email: info@shorefundingltd.com

COMPANY NAME					DATE	
CONTACT NAME			COMPANY PHONE NUMBER		COMPANY FAX NUMBER	
TAX FED I.D. / SSN			EMAIL ADDRESS			
STREET/PHYSICAL ADDRESS			CITY		STATE	ZIP
MAIL/BILLING ADDRESS			CITY		STATE	ZIP
PRINCIPAL NAME/GUARANTOR	COMPLETE HOME ADDRESS		TITLE	DATE OF BIRTH	OWNERSHIP %	SOCIAL SEC. #
1.						
2.						
3.						
If you intend to apply for joint credit (including as a Guarantor), please initial here and sign application as Guarantor 1. X _____ 2. X _____ 3. X _____						
DESCRIPTION OF BUSINESS						
IN BUSINESS SINCE		# OF EMPLOYEES		BANKRUPTCY IN LAST 10 YRS?		BUSINESS TYPE
				<input type="checkbox"/> YES YEAR _____ <input type="checkbox"/> NO		<input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC
# OF PIECES OF EQUIPMENT	REASON FOR EQUIPMENT ACQUISITION					
	<input type="checkbox"/> REPLACEMENT <input type="checkbox"/> ADDITION <input type="checkbox"/> REFINANCE (Please Complete Refinance Worksheet) <input type="checkbox"/> OTHER, PLEASE EXPLAIN:					
<b>BANKING &amp; CREDIT REFERENCES</b>						
BANK NAME		CITY		STATE	PHONE	CONTACT NAME
CHECKING ACCOUNT NUMBER		SAVINGS ACCOUNT NUMBER			LOAN ACCOUNT NUMBER	
SECURED CREDIT REFERENCE		CONTACT NAME	PHONE		ACCOUNT NUMBERS	
1.						
2.						
3.						
<b>FINANCIAL INFORMATION</b>						
GROSS REVENUE 2017		GROSS REVENUE 2018		GROSS REVENUE 2019		PROJECTED REVENUES 2020
NET PROFIT OR LOSS 2017		NET PROFIT OR LOSS 2018		NET PROFIT OR LOSS 2019		PROJECTED NET PROFIT/LOSS 2020

**BUSINESS INFORMATION**

TYPE OF BUSINESS:

TOP FIVE CUSTOMERS	CUSTOMR SINCE	% OF REVENUES	CONTACT NAME	PHONE NUMBER
1.				
2.				
3.				
4.				
5.				

FLEET SIZE

NUMBER OF TERMINALS OWNED AND LOCATION

BRIEF DESCRIPTION OF MAINTENANCE FACILITY AND NUMBER OF LOCATIONS

**INSURANCE INFORMATION (REQUIRED)**

ARE YOU SELF-INSURED?  YES

NO (provide insurance information below)

INSURANCE COMPANY

COMPLETE ADDRESS

CONTACT NAME

PHONE NUMBER

FAX NUMBER

**EQUIPMENT PURCHASE INFORMATION (Attach copy of Invoices)**

EQUIPMENT TO BE FINANCED (DESCRIPTION)	YEAR	NEW OR USED	SERIAL NUMBER
1.			
2.			
3.			

**FINANCING/LEASING INFORMATION**

**DEALER INFORMATION**

SELLING PRICE	\$	DEALERSHIP	PHONE
TAX (+)	\$	CONTACT	FAX
TRADE IN VALUE (-)	\$	DELIVERY DATE	TERM
AMOUNT OWED ON TRADE (+)	\$	List Lender and Acct #	BALLOON / PURCHASE OPTION \$
CASH DOWN PAYMENT (-)	\$	<input type="checkbox"/> LOAN <input type="checkbox"/> LEASE	RENTAL CONVERSION <input type="checkbox"/> YES <input type="checkbox"/> NO
AMOUNT TO FINANCE	\$	SEASONAL SKIPS – IF YES, LIST SKIP MONTHS <input type="checkbox"/> YES <input type="checkbox"/> NO	



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**Please include the following with your credit submittal:**

- Three (3) Years Of Fiscal Year End Financial Statements
- Current Interim Financial Statements
- Personal Tax Returns On All Owners/Stockholders
- Most Recent Personal Financial Statement of All Owners/Stockholders

By signing below, I and/or we certify that:

(1) The information provided in the credit application (whether your form or someone else's) and any financial statements, tax returns, or similar items is true and correct; and (2) I/we have not omitted or failed to include material information relevant to this credit application. Each of the undersigned authorizes Shore Funding Ltd., Inc. ("SFL") or its assignees to conduct inquiries regarding the undersigned's business operations and individual and business credit histories as it may deem necessary including, without limitation, requesting credit bureau reports, contacting banks, secured lenders, lessors and trade creditors for references and for information on Bank accounts, Loans, or Leases. SFL will be notified immediately of any material change in the information presented. I/we authorize all parties contacted by SFL to verify the information contained in this application. I/we authorize all parties contacted to release credit and financial information requested as part of said verification. I/we agree that anyone receiving a fax or photocopy of this document may act in reliance thereon to the same degree as if they possessed an original.

(2) Privacy, the Patriot Act, and Opening an Account. Federal law requires Shore Funding Ltd., Inc. or its assignees to obtain, verify and record information that identifies each person or entity that opens an account. This information helps the government fight the funding of terrorism and money laundering activities. When you open an account or apply for a loan or lease, at SFL we will ask you for your name, address, date of birth and Social Security or EIN number. For a business, we will ask for your company's name, address and Tax Identification number. In some instances we may also ask to see your driver's license or other identifying documents.

(3) By signing below, I/we certify that as part of our normal business operation I/we do not provide check cashing, exchange currency or issue money orders, traveler's checks, prepaid cards or provide money transfer services for our customers. I/we certify that we do not own or operate an internet gambling business.

All individuals applying for credit as a guarantor of any loan or lease must sign. If signing as an officer of proposed borrower/lessee AND as an individual, you must sign twice. Do NOT use a title when you sign as an individual.

Applicant Signature _____	Applicant Signature _____
Title _____	Title _____
Date _____	Date _____

Guarantor Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Guarantor Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Guarantor Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

The Equal Credit Opportunity Act (ECOA) prohibits a creditor from discriminating against a credit applicant on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income comes from any public assistance program, or because the applicant has, in good faith, exercised any right under the Consumer Credit Protection Act. The Federal Trade Commission administers compliance with ECOA. You may contact the Federal Trade Commission at 600 Pennsylvania Avenue, NW, Washington, DC 20580. If your application is denied, you are entitled to request a written statement indicating the reason(s) for our decision. To receive such a statement, please send your request to: Shore Funding Ltd., Inc., 1161 Broad Street, Shrewsbury, NJ 07702. Or contact us at (800) 542-7467.

**Authorization to Obtain and Release  
Consumer Credit Information**

**To:** Shore Funding Ltd., Inc. and/or its affiliates and assigns

**Re:** Requested Financing for:

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Company's Name

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Company's Address

In connection with the above referenced Financing (and any update, extension, modification, renewal or review thereof if such Financing is granted), each of the undersigned hereby authorizes Shore Funding Ltd., Inc. and each of its affiliates and assigns (collectively, "Shore Funding") to make all inquiries it deems necessary to verify the accuracy of information provided by the undersigned and/or to determine the undersigned's creditworthiness including, without limitation, obtaining consumer and/or business credit reports regarding the undersigned. Each of the undersigned hereby acknowledges that Shore Funding will obtain a consumer credit report concerning them.

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Print Individual's Name

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Print Individual's Name

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Address

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Address

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City, State, Zip

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City, State, Zip

---

Home Phone Number

---

Home Phone Number

---

Social Security Number

---

Social Security Number

---

Date of Birth

---

Date of Birth

---

Signature: \_\_\_\_\_

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Signature: \_\_\_\_\_

Individually  
Please attach a copy of a government  
issued signed photo ID for each applicant.\*

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Please attach a copy of a government  
issued signed photo ID for each applicant.\*

*\*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: We ask you for your name address, date of birth and copy of a government issued signed photo ID that allows us to identify you.**