

Credit Application

Customer Information

Business Name (correct legal name): _____

Trade Name (if applicable): _____

Business Mailing Address: _____
(street) (city) (county) (state) (zip)

Business Telephone #: () _____ Fax #: () _____ Business Web Site Address: _____

Primary Contact Name(s): _____ Cell #: () _____ Business Email Address: _____

Business owner/officer/member/partner: (note: If there are more than two, please copy application, fill out necessary info and sign authorization below)

Name: _____ Soc.Sec.#: _____ Title: _____ Ownership %: _____

Home Address: _____
(street) (city) (county) (state) (zip)

Home Phone #: () _____ Cell #: () _____ Email: _____

Name: _____ Soc.Sec.#: _____ Title: _____ Ownership %: _____

Home Address: _____
(street) (city) (county) (state) (zip)

Home Phone #: () _____ Cell #: () _____ Email: _____

Business Information:

Business Type: (check one) Proprietorship Corporation LLC Partnership FED ID# _ _ - _ _ _ _ _ State: _____

Industry: (check one) Amusement (FEC, Arcade) Amusement (Route) OCS Vending Gaming/Lottery Other: _____

Year Business Started: _____ Annual Revenues in Most Recent Year: _____ Average Split %: _____

Food/Plush/Music Costs: _____ # of locations: _____ Types of locations: _____ # Pieces of Equipment: _____

Types of Equipment: _____

How Did You Hear About Firestone? (if an advertisement, please specify publication name) _____

Transaction Information:

Equipment Vendor: _____ Vendor Phone #: () _____

Equipment Description (Year, Make, Model, Serial #): _____

Equipment Cost: _____ Down Payment Amount (Please specify Cash or Trade): _____ Term Length Requested: _____

References: (fill in as many that apply)

1. _____
(Vendor/Trade Reference) (phone #) (contact name) (years with vendor/trade) (current balance)
- _____
- _____
- _____
- _____
2. _____
(Business Checking Account) (phone #) (contact name) (account #) (city/state)
3. _____
(Loan Reference) (phone #) (contact name) (loan/lease #) (current balance) (monthly pmt)

I submit the information hereof is true and complete, and I agree to furnish financial statements from time to time as you may request, and promptly notify you of changes in my financial circumstances. Authorization is given by signature(s) below for Firestone Financial Corp. to inquire about credit experience of above bank and trade references and to make inquiries of credit reporting agencies and authority is granted for stated references and credit reporting agencies to furnish this information. Further, I authorize Firestone to contact me via auto-phone/text messaging in order to communicate important information.

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 Firestone Financial Corp. within 60 days from the day 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 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), familial status, sexual orientation, ancestry, handicap or whether or not all or part of the person's income derives from any public assistance program: or whether 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 Federal Deposit Insurance Corporation, 15 Brintree Hill Office Park, Brintree, MA 02184. The state agency that administers compliance with the state law is Massachusetts Commission Against Discrimination, One Ashburton Place, Boston, MA 02108.

Signed by Applicant: _____

Signed by Applicant: _____



CELEBRATING 45 YEARS IN BUSINESS