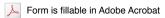


Equipment Finance Application



PERSONAL INFORMATION					
Legal Name of Business:		Tax ID#:			
Address 1:		City:			
Address 2:	State:		ZIP:		
Phone:	Structure LLC, LLP, S, C Corp:		Date Established:		
Owner Name & Position:	Website:				
Home Phone:	Cell Phone:				
Home Address 1:	City:				
Home Address 2:		State:		ZIP:	
Own or Rent Home:	Current On Mortgage	: Yes	No	Mortgage Modification:	Yes No
How long at current address:	Birth Date:		Email:		
Social Security Number:		Spouse Name:			
BANK REFERENCE					
Name of Bank:	Checking Acct # & Bal				
Contact:	Phone:	Loans	s Bal & #:		
INSURANCE INFORMATION					
Name of Insurance Agent:		Phone:			
Address 1:		City:			
Address 2:		State:		ZIP:	
Policy #:		Expiration:			
WORK REFERENCES					
List your two largest customers or the hauling co/brokers you currently work for:					
Name 1:	Contact:			Phone:	
Name 2:	Contact:			Phone:	
EQUIPMENT & VENDOR INFO					
Equipment/Vehicle to be financed:				Price:	
Equipment/Vehicle to be financed:				Price:	
Vendor/Seller:	Contact:			Phone:	
Address 1:		City:			
Address 2:		State:		ZIP:	
SIGNATURE					
Applicant authorizesDrawbridge Capitaland their affiliate lenders to carry on a complete credit investigation of applicant and theprincipals asDrawbridge Capitaland affiliate lenders thedeems necessary to process this application. Furthermore, by signingbelow you certify that the statements above and on any attachments are true and complete as of the date given below.					
Signature				Date	