APPLICATION

2662 Holcomb Bridge Rd., Suite 314
Alpharetta, GA 30022
(770) 390-9400ext.202104 • (800) 648-6477ext.202104 • (770) 394-1777, fax
Kimberly Morgan kmorgan@acifinancial.com

COMPANY NAME Important to list legal name of entity

Company				Nature of Business
Physical Address				Federal I.D. Number
City	County	State	Zip	Years in Business
Telephone	Fax Number	Contact		☐ Proprietorship ☐ Partnership ☐ LLC ☐ Corporation ☐ Sub S ☐ PA/PC

EQUIPMENT LOCATION (if different than above)

EQUIPMENT TO BE LEASED PURCHASE PRICE

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SELLER OF EQUIPMENT Company Name, Contact Name and Phone Number

ELECTRO MECH 72 Industrial Parkway Wrightsville, GA 31096 800-445-7846

TERMS AND CONDITIONS

TERM (Months)	MONTHLY LEASE	TAX (if applicable)	PURCHASE OPTION	ADVANCE PAYMENT

TRADE REFERENCES Major Accounts you pay monthly

Name	City/State	Telephone No.	Account No.	Contact

COMPANY BANK REFERENCES Include all Checking, Savings, and Loan Accounts

Bank	Bank	Bank (If Proprietorship-include Personal Account)
Phone	Phone	Phone
Account No.	Account No.	Account No.
Contact	Contact	Contact

PERSONAL INFORMATION On Officers, Partners, or Guarantors

Name		Title	% of Ownership	Social Security No.
Home Address	City	State	Zip	Home Phone No.
Name		Title	% of Ownership	Social Security No.
Home Address	City	State	Zip	Home Phone No.

AUTHORIZATION TO RELEASE INFORMATION

By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to ACI Financial, Inc. or its designee (any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual's identified in the above application.

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