



# Equipment Finance Program Offered By: Coast Commercial Credit, LLC

Legal Name of Company			Amount Requested		Term Requested	
Use of Proceeds					Estimated Funding Date	
Business Address			City	State	Zip	County
Equipment Location			City	State	Zip	County
Contact / Title			Cell Phone Number		Business Phone Number	
E-Mail Address				Years in Business		
Federal Tax ID#			Landlord Name (if applicable)			
Type of Business			Corp. <input type="checkbox"/>	S-Corp. <input type="checkbox"/>	Partner. <input type="checkbox"/>	Proprietor. <input type="checkbox"/>
			L.L.C. <input type="checkbox"/>	Number of Employees		
<b>Principal Information For All Owners</b>						
Full Name		Home Address		City	State	Zip
SSN	Date of Birth	# of Locations Currently Own	% of Ownership		Years Experience in Industry	
E-Mail Address			Cell Phone Number		Title	
Full Name		Home Address		City	State	Zip
SSN	Date of Birth	# of Locations Currently Own	% of Ownership		Years Experience in Industry	
E-Mail Address			Cell Phone Number		Title	
<b>Business Loan / Lease References</b>						
<b>Supplier/ Institution</b>	<b>Account Name</b>	<b>Account Number</b>	<b>Contact</b>	<b>Phone Number</b>	<b>Balance</b>	

**AUTHORIZATION FOR DISCLOSURE OF CREDIT INFORMATION**

Because I have applied to Coast Commercial Credit, LLC or Coast Commercial Credit, Inc. (Coast) for financing, I hereby authorize you to disclose to Coast or its assigns the personal and/or business information as may be required concerning the above statements or attached enclosures within the framework of the Fair Credit Reporting Act. I hereby represent to Coast or its assigns that such information is true, correct and complete. A Photostatted copy of this authorization shall be valid as the original. The applicant agrees that Coast or its assigns have the right to confirm the accuracy of the above credit information and that Coast or its assigns have the right to accept or reject this credit application. The applicant understands that Coast or its assigns are relying on the credit application and financial information submitted by the applicant in making its decision in whether to approve the credit request. The applicant agrees to immediately inform Coast or its assigns of any matter that will cause any significant change in the applicant's financial condition. The applicant agrees to irrevocably release Coast or its assigns from any and all liability associated with this transaction. The applicant irrevocably authorizes Coast or its assigns to execute and file UCC financing statements and/or execute credit request authorizations in any and all names related to this transaction.

<b>SIGNATURE</b>	<b>SIGNATURE</b>
<b>TITLE</b>	<b>TITLE</b>
<b>DATE</b>	<b>DATE</b>

**Coast Commercial Credit™**  
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