

Laundry Funding Credit Application (U.S.)

BUSINESS					
APPLICANT(S) (Exact legal na	me)		DBA		
ADDRESS					
CITY		STATE	ZIP	PHONE	
LOCATION OF EQUIPMENT A	DDRESS				
CITY		STATE	ZIP	PHONE	
CELL PHONE			EMAIL		
GROSS ANNUAL SALES		YEARS IN BUSINESS	YEARS UNDER CURRENT OWNERSHIP	FEDERAL TAX I.D.	
☐ Proprietorship	☐ Corporation	☐ Partnership	☐ Limited Liability Co.	STATE OF INCORPORATION	
OWNERSHIP					
PRINCIPAL #1 NAME					
TITLE		% OWNERSHIP	SOCIAL SECURITY NO.	YEARS OF INDUSTRY EXPERIENCE	
ADDRESS		1			
CITY		STATE	ZIP	PHONE	
PERSONAL ANNUAL GROSS INCOME (Not including spouse)			MORTGAGE/RENT (Residence only)	BIRTH DATE (MM/DD/YYYY)	
PRINCIPAL #2 NAME					
TITLE		% OWNERSHIP	SOCIAL SECURITY NO.	YEARS OF INDUSTRY EXPERIENCE	
ADDRESS					
CITY		STATE	ZIP	PHONE	
PERSONAL ANNUAL GROSS II	NCOME (Not including spouse)		MORTGAGE/RENT (Residence only)	BIRTH DATE (MM/DD/YYYY)	
I understand that this eq check references, bank ac	uipment application may be counts and credit informati	approved based on my bi on.	l usiness and personal credit. I authorize	Laundry Funding or its assignees to	
APPLICANT'S SIGNATURE			DATE		
APPLICANT'S SIGNATURE			DATE		

ECOA NOTICE: DISCLOSURE OF RIGHT TO REQUEST SPECIFIC REASONS FOR CREDIT DENIAL GIVEN AT TIME OF APPLICATION (BUSINESS CREDIT). If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain the statement, please contact Credit Manager, Laundry Funding, 461 Doughty Blvd., Inwood, NY 11096, 866-837-7602 within 60 days from the date 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 federal 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), because all or part of the applicant's income derives from any public assistance program, or because 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 the creditor is the Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Boulevard, Suite 100, Kansas City, MO 64108.



APPLICANT'S SIGNATURE

Professional Laundry Equipment Finance Application

Required if the financing requested exceeds \$100,000 or if operation under present ownership is less than two years. If additional space is needed, please attach your own schedule.

PERSONAL FINANCIAL	STATEMENT	Ll	ABILITIES	S		
TOTAL AVAILABLE CASH	SH \$		ANS DUE TO BANI	\$		
TOTAL IN RETIREMENT ACCOUNTS \$		LO	ANS DUE TO OTHI	\$		
MARKETABLE SECURITIES (stocks, bonds,	CR	EDIT CARD BALA	\$			
\$		INC	COME TAXES DUE	\$		
2.	\$	RE	AL ESTATE MORT	\$		
VALUE OF REAL ESTATE	\$		HER DEBTS (list al	cosigner, guarantor, etc.)		
AUTOMOBILES	'	1.	1. \$			
1. \$		2.		\$		
2.	\$		TAL LIABILITIES	\$		
TOTAL ASSETS	\$		TOTAL ASSETS MINUS TOTAL LIABILITIES		\$	
	'					
DETAIL - REAL ESTATE	E OWNED AND	RELATED	MORTGAG	ES		
FULL PROPERTY ADDRESS	DATE ACQUIRED	ORIGINAL COST	CURRENT VALUE	MORTGAGE BALANCE	NAME OF BANK	
		\$	\$	\$		
		\$	\$	\$		
		\$	\$	\$		
☐ Enclosed Tax Returns for the mos	t recent two vears.		Start-up la	undries or new owner	s of existing store being	
☐ Enclosed recent statements to ver	-	nts.	retooled: P	lease include 1) Complete	e resumé of owner listing owned	
☐ Enclosed three (3) months bank st	-			history and respective do ailed to info@laundryfun	ates, and 2) Digital photos of the adding.com.	
	·····					
FINANCING REQUESTED	(Must be completed by all	applicants)				
AMOUNT REQUESTED	FINANCE PROGR		EQUIPMENT COST			
\$			\$			
	<u>'</u>			-		
COMMEDCIAL LAUNDDY	, DICEDIBLE OF	INFORM	ATION			
COMMERCIAL LAUNDRY	CONTACT	INFURMA	ATION	PHONE		
DISTRIBUTOR NAME	CONTACT			FHONE		
I understand that this equipment applicat	tion may be approved base	ad on my husinasa	and parsonal cra	dit Lauthoriza Laundry	Eunding or its assigneds to	
check references, bank accounts and cred		eu on my business	unu personai crei	an. 1 aathorize Laanary	runding of its assignees to	
APPLICANT'S SIGNATURE			DATE			

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