

CREDIT APPLICATION

For secure transmission of your confidential credit and financial information, please use the [Secure Document Upload](#) feature on our website.

**SUMMERS
ENGINEERED
CAPITAL**

COMPANY INFORMATION									
Complete Legal Name of Business				Business Structure <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> S Corp <input type="checkbox"/> LLP <input type="checkbox"/> C Corp <input type="checkbox"/> LLC <input type="checkbox"/> Other:				Last Year Gross Revenue	
Doing Business As (DBA) If Applicable			Website						Last Year Net Profit
Point of Contact (Name)		Email Address		Business Telephone		State of Incorporation			
Federal TIN #		Business Start Date		Has Business Changed Ownership? <input type="checkbox"/> Yes-Date <input type="checkbox"/> No			Type of Business		
Billing Address			City		State		Zip Code	County	
Equipment Address (If Different than above)			City		State		Zip Code	County	
PRINCIPAL OWNER(S) / GUARANTOR(S) INFORMATION									
Legal Name		Title	% Own.	Annual Salary	<input type="checkbox"/> Own Home <input type="checkbox"/> Rent		Date of Birth		Social Security #
Street Address		City	State	Zip Code	<input type="checkbox"/> US Citizen <input type="checkbox"/> Not US Citizen		Telephone		Email Address
Legal Name		Title	% Own.	Annual Salary	<input type="checkbox"/> Own Home <input type="checkbox"/> Rent		Date of Birth		Social Security #
Street Address		City	State	Zip Code	<input type="checkbox"/> US Citizen <input type="checkbox"/> Not US Citizen		Telephone		Email Address
CORPORATE GUARANTOR(S) INFORMATION									
Legal Name of Business			Federal TIN#		<input type="checkbox"/> Co-Borrower <input type="checkbox"/> Guarantor		Business Structure <input type="checkbox"/> Partnership <input type="checkbox"/> S Corp <input type="checkbox"/> LLP <input type="checkbox"/> C Corp <input type="checkbox"/> LLC <input type="checkbox"/> Other:		
Street Address		City	State	Zip Code	Business Start Date				
EQUIPMENT DETAILS									
Description (Please Include Copy of Quote or Invoice)				Equipment <input type="checkbox"/> NEW <input type="checkbox"/> USED <input type="checkbox"/> ADDITION <input type="checkbox"/> REPLACEMENT		TERM LENGTH <input type="checkbox"/> 36 Months <input type="checkbox"/> 48 Months <input type="checkbox"/> 60 Months <input type="checkbox"/> Other:		Equipment Cost	
Vendor / Dealer Name		Contact	Phone Number				Down Payment	Finance Amount	
Desired Structure: <input type="checkbox"/> \$1.00 Lease <input type="checkbox"/> FMV <input type="checkbox"/> Loan				Delivery Date					
BANK & TRADE REFERENCE									
Primary Bank Name		Contact		Phone #	Checking Account Balance			Current Loan Balance	
Trade or Other Lender Reference Name		Contact		Phone #	Type of Equipment/Trade Line			Current Balance	

REPRESENTATIONS: By signing below, I represent that (i) if I am an Applicant indicated above, I am signing individually, (ii) for each entity that is an Applicant indicated above, either I or another signer below is signing as an authorized representative of such Applicant, and (iii) the information contained in this Application is true and complete. The following authorizations (i) apply to this Application and subsequently for purposes of extending, reviewing, updating, and collecting credit; and (ii) are granted to Summers Engineered Capital LLC and its affiliates, assigns or potential assigns (collectively, "Summers Engineered Capital LLC"), and any unaffiliated financial institution or other potential creditor to which this Application is referred (collectively with Summers Engineered Capital, the "Financing Sources"). A copy of these authorizations shall be valid as the original.

AUTHORIZATIONS: By signing below, I (individually and on behalf of any entity, as the case may be) hereby authorize: (i) Summers Engineered Capital to refer this Application to any other Financing Source; (ii) any Financing Source to request, obtain and disclose information bearing on Applicant's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living, including credits reports and background checks (collectively, "Credit Information"); (iii) credit reporting agencies, Applicant's banks and other third parties to provide Credit Information to any Financing Source; and (iv) any Financing Source to file UCC financing statements covering Applicant's vehicles and/or other intended collateral, in anticipation of extension(s) of credit.

Signature _____
 Print Name & Title _____
 Date _____

Signature _____
 Print Name & Title _____
 Date _____

EOCA 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, 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 this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006. If your application for business credit is denied or conditionally approved, you have the right to a written statement of the specific reasons for the denial or the conditional approval. To obtain the statement, please contact Summers Engineered Capital, LLC, 10 Westedge Street #701, Charleston, SC, 29407 or by calling 843-200-9470 within 60 days from the date you are notified of such denial or condition. We will send you a written statement of the reasons for denial within 30 days of receiving your request for the statement.

IMPORTANT INFORMATION ABOUT ESTABLISHING A RELATIONSHIP: To help the United States Government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who establishes a relationship with the financial institution. What this means for you: When you establish a relationship, the financial institution will ask for your name, street address, taxpayer identification number and other identifying information. For individuals, the financial institution will also ask for date of birth. The financial institution may ask to see your driver's license or other identifying documents. Thank you for your cooperation.