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CREDIT APPLICATION

COMPLETE LEGAL NAME		EMAIL		<input type="checkbox"/> SOLE PROPRETOR
TYPE OF BUSINESS	FEDERAL ID NUMBER		YEARS IN BUSINESS	<input type="checkbox"/> PARTNERSHIP
MAILING /BUSINESS ADDRESS		COUNTY	PHON NUMBER	<input type="checkbox"/> LLC
EQUIPMENT LOCATION		COUNTY	PHONE NUMBER	CONTACT
INSURANCE AGENT			AGENT PHONE NUMBER	
PRINCIAPAL / OFFICER / PARTNER	SOCIAL SECURITY #	TITLE/%OWNED	HOME ADDRESS & TELEPHONE	
BANK/MONEY MARKET ACCOUNTS	ACCOUNT #	TELEPHONE	OFFICER TO CONTACT	
BUSINESS				
BUSINESS				
BUSINESS/PERSONAL				
TRADE REFERENCES	ACCOUNT#	TELEPHONE #	CONTACT	
EQUIPMENT LEASE REFERENCE	ACCOUNT#	TELEPHONE #	CONTACT	
EQUIPMENT TO BE FINANCED				
SUPPLIER		CONTACT		
TYPE OF EQUIPMENT	NEW / USED	COST OF EQUIPMENT		

The undersigned individual recognizing that his or her individual credit history may be a factor in the evaluation of the credit of the applicant, hereby consents to an authorizes the above named business credit provider and may assignee, lender or funding service that may be utilized to obtain and use a consumer credit reporting on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process, and, if necessary, any collection actions to be taken on the account. The undersigned waives any right or claim they would otherwise have under Fair Credit Report Act in the absence of this continuing consent

I hereby authorize our banks, trades, and personal credit bureaus to release credit information to

Northern Atlantic Financial, LLC. and/or its assignees.	X
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