

EQUIPMENT FINANCE APPLICATION

1000 Whilshire Blvd., 20th Floor, Los Angeles, CA 90017-5600 Voice: (213) 240-1234, Fax: (213) 228-5555

BUSINESS APPLICANT	COMPANY NAME (Full Legal name Including DBA if Applicable)						CONTACT		DATE		
	ADDRESS			CITY		STATE	COUNTRY		ZIP CODE	PHONE NO.	
	EQUIPMENT LOCATION ADDRESS (If Different than above)			CITY STATE		STATE	COUNTRY		ZIP CODE	FAX NO.	
	TYPE OF BUSINESS	DATE EST.	YRS/CURR. OWNERESH	IP	FED TAX I.D.#		STRUCTURE OF OWNE		ERSHIP () Closely held		
	LANDLORD NAME PHONE NO.		YRS/CURR. ADDRESS	# OF EMPLO		OYEES	 () Partnership () Corporation 	,	 () Sub Chapter S () Public 		
	INSURANCE AGENT NAME AND ADDRESS			CONTACT PHONE NO				STATE OF ORGANIZATION			
OWNERSHIP	PRINCIPAL'S NAME		TITLE	% OF WONERSHIP			SOC SEC #		DRIVER'S LIC #		
	HOME ADDRESS			HOME PHONE		HOW LONG	G()OWN ()RENT		SPOUSE		
	PRINCIPAL'S NAME		TITLE	% OF WONERSHIP			SOC SEC #		DRIVER'S LIC #		
	HOME ADDRESS			HOME PHONE		HOW LONG	()OWN ()RENT		SPOUSE		
BANKS/LENDER	BANK/LENDER NAME		BRANCH			CONTACT		PHONE			
	() CHECKING ACCT. () LEASE () SAVING ACCT. () LOAN		NAME OF ACCOUNT	ACCOUNT #		DATE OPENING		FAX NO.			
	BANK/LENDER NAME		BRANCH	NCH			CONTACT		PHONE		
	() CHECKING ACCT. () LEASE () SAVING ACCT. () LOAN		NAME OF ACCOUNT ACCOUNT #		DATE OPENING		FAX NO.				
INST DEBT	LENDER NAME		ADDRESS				CONTACT PHONE N		PHONE NO.		
	LENDER NAME		ADDRESS				CONTACT		PHONE NO.		
	LENDER NAME		ADDRESS			CONTACT		PHONE NO.			
TRADES	COMPANY NAME		PHONE NO. / FAX NO. LOCATION					ACCT # OR CONTRACT			
EQUIP	VENDOR							CONTACT		PHONE NO.	
	EQUIPMENT DESCRIPTION (Maker, Model, Serial #)						TERM	COST			
	IMPORTANT - APPLICANT READ BEFORE SIGNING										
AUTHORIZATION	I hereby certify that all information contained in this application and all attachments hereto, are true and complete to the best of my knowledge, and are made for the purpose of obtaining credit. I authorize Hana Commercial Finance, Inc., and any assignee, lender or funding service to verify any of the information from whatever source it deems appropriate and lfurther authorize any of the above reference to release credit information to Hana Commercial Finance, Inc. I agree to notify you of any changes in the condition of my affairs, and this statement shall be construed by you to be a continuing statement of the conditions of the undersigned until written notice to the contrary is received by you. It is understood that this application shall remain the property of Hana Commercial Finance, Inc. Inc. Inc. Inc. Inc. Inc. Inc. Inc.										
	applicant. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, contact Hana Commercial Finance, Inc. within 30 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 applicants on the basis of race, color, religion, national										
	origin, sex, martial status, or age (provided the applicant has the capacity to enter into a binding contract); or because all or part of the applicant's income derives from any public assistance program or because the applicant has in good faith expercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.										
	04/12/2022 THIS APPLICATION MUST BE FILLED OUT COMPLETELY										
	DATE	SIGNATURE					TITLE				