



DIRECT SOURCE CAPITAL

COMMERCIAL FINANCE APPLICATION

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ACCOUNT EXECUTIVE
DATE

CUSTOMER'S FULL COMPANY NAME
DATE ESTABLISHED (UNDER CURRENT OWNERSHIP)
CUSTOMER'S FULL COMPANY ADDRESS CITY STATE ZIP CODE TELEPHONE WEBSITE
OTHER LOCATIONS? FEDERAL TAX NO. CONTACT E-MAIL ADDRESS
NATURE OF BUSINESS TYPE OF BUSINESS: SOLE PROP OR FREELANCER PARTNERSHIP OR LLC CORPORATION STATE INC.

GUARANTORS / OWNERS (1) (2) (3)
NAME
STREET
CITY, STATE, ZIP
HOME OR CELL NUMBER
SOCIAL SECURITY NUMBER
TITLE
% OF COMPANY OWNERSHIP HOMEOWNER? % %

CREDIT REFERENCES (ALSO ATTACH 3 MONTHS BUSINESS BANK STATEMENTS - ALL PAGES)
BANK CITY/STATE PHONE NUMBER CONTACT ACCOUNT NUMBER
EQUIPMENT FINANCING ORIGINAL AMOUNT BALANCE REMAINING OPENED ACCOUNT NUMBER
LOANS OR LINES OF CREDIT ORIGINAL AMOUNT BAL. REMAINING OPENED ACCOUNT NUMBER

SELLERS OF EQUIPMENT (ATTACH COPIES OF SALES QUOTES/INVOICES, IF AVAILABLE)
SELLER'S COMPANY NAME ADDRESS CITY STATE ZIP
CONTACT PHONE NUMBER EMAIL
EQUIPMENT DESCRIPTION NEW USED
EQUIPMENT LOCATION (IF DIFFERENT FROM CUSTOMER'S BILLING ADDRESS ABOVE)
TERM REQUESTED (18-60 MOS) WHEN IS EQUIPMENT NEEDED BY? ARE YOU TAX EXEMPT? TOTAL EQUIPMENT COST

CREDIT RELEASE
The undersigned individual(s) (either a principal of the credit applicant or a guarantor of its obligations) provides this written instruction to DSC or its nominee/assigns authorizing review of their personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit and for reviewing and collecting the resulting acct. A photostat or facsimile of this authorization shall be valid as the original. By signing below, I/we affirm our identity as the respective individuals identified in the related application. The undersigned states that all of the above statements are true & complete and authorizes DSC or its nominee/assigns to obtain from any source information re: the credit standing of the applicant or guarantors.

X _____ DATE _____