



FINANCE CREDIT APPLICATION

INTERNAL USE

App #: _____
Sales Rep: Tony Ferrono

www.marlincorp.com

Marlin – Corporate Office
300 Fellowship Road • Mt. Laurel, NJ 08054
phone: 888.479.9111 • fax: 8 . . .

or Marlin Business Bank
2795 E. Cottonwood Pkwy, Ste 120 • Salt Lake City, UT 84121
phone: 801.453.1722

Processing Office
1500 JFK Blvd., Ste 330
Philadelphia, PA 19102

The business software/equipment you are acquiring can be financed (subject to acceptance by one of the finance companies identified above) under the following terms:

TOTAL COST: \$ _____ **Term:** _____ mos. Rate Factor Used: _____ Monthly

Payment (plus applicable taxes): \$ _____ Purchase Option:

Advance Rentals: \$ _____ Security Deposit: \$ _____ Other:

SOFTWARE / EQUIPMENT BEING FINANCED (include quantity, make, model, serial number and accessories)

CHECK HERE IF EQUIPMENT IS USED:

Software/Equipment Location (if different) _____
Street City County State Zip

CUSTOMER INFORMATION

MAY WE CONTACT CUSTOMER IF ADDITIONAL INFORMATION IS NEEDED? YES NO

Full Legal Business Name: _____ Contact Name: _____

Address: _____

Street City County State Zip

E-Mail: _____ Web Address: _____ No. of Employees: _____

Phone: _____ Fax: _____ Federal Tax ID #: _____ Years in Business: _____

Nature of Business: _____ Years of Ownership: _____

State of Incorporation/Organization: _____ Business Type: Corp. Limited Liability Corp. Partnership Proprietorship

OWNERS, PARTNERS OR GUARANTORS

1) Name: _____ Title: _____ SS#: _____

Home Address: _____ Home Phone: _____

2) Name: _____ Title: _____ SS#: _____

Home Address: _____ Home Phone: _____

BANK INFORMATION

Name of Bank: _____ Bank Officer: _____ Phone: _____

Deposit/Check Acct #: _____ Loan Acct. #: _____ Name of Bank: _____

Bank Officer: _____ Phone: _____ Deposit/Check Acct #: _____

Loan Acct. #: _____

Name of Supplier: _____ Contact: _____

Address: _____ Phone: _____

VENDOR INFORMATION

DEALER GROUP CODE: _____

Name: Pre-Floor Distributors Contact: Don Hamilton

Address: PO Box 12887 Wilmington NC 28405

Street City County State Zip

Phone: 910-452-0002 Fax: _____ E-Mail: Don@prefloortools.com

The person(s) supplying the above information certifies to both potential finance companies identified above that it is true and correct. The Owners/Partners/Guarantors recognize that their individual credit histories may be a factor in the evaluation of the credit applicant and, thus, authorize the financial company(ies) or its assignee or its designee to investigate their personal credit status. This includes obtaining and using their consumer credit reports from time to time in the credit evaluation and collection processes, as well as to offer future credit products or services.
