



**Customer  
Information Form**

**Applicant Information**

Legal Business Name		Business Phone
Trade Name		Fax
Billing Address		Years in Business      Number of Locations
City, State, Zip	Cell Phone #	Email
Contact Person	Federal ID #	Business Structure ( <i>Corp, LLC, Prop, etc.</i> )

**Personal Information of Officers/Partners/Owners**

Name	Home Address, City, State, Zip, Phone	Title / %	SSN
Name	Home Address, City, State, Zip, Phone	Title / %	SSN
Name	Home Address, City, State, Zip, Phone	Title / %	SSN

**Vendor Information**

**Equipment Information**

Name of Vendor	Equipment Cost
Equipment Type(s)	Physical Address of Equipment (if different than above)
Sales Rep	
Phone	Term of Request: 24mo   36mo   48mo   60mo

**Banking References**

Bank Name	Account Number	Phone	Fax (   )	Contact Person
Bank Name	Account Number	Phone (   )	Fax (   )	Contact Person

**Statement**

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Customer authorizes RD Funding or its assigns ("RD") to request, verify and review data or information about the customer, its officers, partners, owners and guarantors including reports from agencies and information from references. RD is authorized to give credit information about customer to others. All information provided herein is correct and complete. If business credit is denied, customer has the right to a written statement of the specific reasons for the denial. To obtain this statement, please contact RD at address shown above within 60 days of a denial. A fax or photocopy of this authorization shall be valid as the original.

<b>Signature:</b>	<b>Print Name &amp; Title:</b>	<b>Date:</b>
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