

Impression Technology USA

CREDIT APPLICATION

return form by email to sales@imtechusa.com

LESSEES FULL COMPANY NAME: _____

EQUIPMENT ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

BUSINESS PHONE NUMBER _____ FAX NUMBER _____ CELL PHONE NUMBER _____

TYPE OF BUSINESS _____ FEDERAL ID NUMBER _____ ANNUAL REVENUE _____ DATE BUSINESS STARTED UNDER CURRENT PRESIDENT/OWNER _____

WEB SITE ADDRESS _____ EMAIL ADDRESS _____

BUSINESS (check one) CORPORATION LIMITED LIABILITY PARTNERSHIP PROPRIETORSHIP

PERSONAL INFORMATION ON OWNER(S):

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

SOCIAL SECURITY # _____

SOCIAL SECURITY # _____

% OF OWNERSHIP & TITLE _____

% OF OWNERSHIP & TITLE _____

HOME PHONE # _____

HOME PHONE # _____

BUSINESS BANK INFORMATION:

BANK NAME _____

PHONE # _____

ACCOUNT # _____

CONTACT _____

INSURANCE COMPANY INFO:

COMPANY NAME _____

PHONE # _____

ACCOUNT # _____

CONTACT _____

= VENDOR & EQUIPMENT INFORMATION: (WHO ARE YOU BUYING THE EQUIPMENT FROM)

BUSINESS NAME Impression Technology USA INTERESTED IN: Loan Lease Both

CONTACT Bryan Chenoweth PHONE # 888-365-9974

EQUIPMENT _____

COST \$ _____ (WITHOUT TAX) TERM _____ **Check One** NEW USED/ YEAR _____

NOTICE TO ALL BUSINESS APPLICANTS: IF YOUR APPLICATION FOR BUSINESS CREDIT IS DENIED, YOU HAVE THE RIGHT TO A WRITTEN STATEMENT OF THE SPECIFIC REASONS FOR DENIAL. TO OBTAIN THE STATEMENT, PLEASE CONTACT US WITHIN 60 DAYS FROM THE DATE YOU ARE NOTIFIED OF OUR DECISION. WE WILL SEND YOU A WRITTEN STATEMENT OF THE REASONS FOR THE DENIAL WITHIN 30 DAYS OF RECEIVING YOUR REQUEST. NOTICE: THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT PROHIBITS CREDITORS FROM DISCRIMINATION AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE (PROVIDED THE APPLICANT HAS THE CAPACITY TO ENTER INTO A BINDING CONTRACT); BECAUSE, ALL OR PART OF THE APPLICANT'S INCOME DERIVES FROM ANY PUBLIC ASSISTANCE PROGRAM; OR BECAUSE THE APPLICANT HAS IN GOOD FAITH EXERCISED 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 OPPORTUNITY, WASHINGTON, D.C. TO SECURE THIS LEASE, LESSEE AGREES TO PAY THE ADVANCE PAYMENT AND/OR SECURITY DEPOSIT AMOUNT ALONG WITH A NON-REFUNDABLE DOCUMENTATION FEE REQUIRED AT THE TIME OF LEASE SIGNING. IF FOR ANY REASON THIS LEASE IS NOT FINALIZED, IT IS SPECIFICALLY AGREED THAT WE MAY RETAIN THE ADVANCE PAYMENT AND /OR SECURITY DEPOSIT AMOUNT AND SUCH AMOUNT IS FULLY EARNED.

By signing below, each undersigned individual, as a principal of and/or guarantor for the Applicant, authorizes Lessor, its designees, assignees and potential assignees, to review his or her personal credit profile and other information as provided by national credit bureaus, banks and third parties, as Lessor in its sole discretion shall deem necessary. Such review shall be made for the purpose of considering this Application and for the purpose of any update, renewal, extension or on future credit submissions to the Applicant or for the collection and review on any resulting accounts with Applicant. A fax or photocopy of this Authorization shall be deemed valid as the original.

DATE _____ SIGNATURE: **X** _____

DATE _____ SIGNATURE: **X** _____