

ASV Capital (Phone 877.ASV.8282)
 1540 West Fountainhead Pkwy
 Tempe, AZ 85282

CREDIT APPLICATION
 FAX Application to 877.248.6955



COMPANY INFORMATION	Customer Legal Name		Yrs in Business	<input type="checkbox"/> Current customer of ASV Capital (list acct#)
	Street Address		Nature of Business	
	City/County/State/Zip		Phone No.	Fax no.
	Federal Tax ID No. (REQUIRED)		Contact/Title	Cell No.
	Equipment Location (if different from above) Street Address/City/County/State/Zip		Type of Business	
	Principal/Partner/Officer/Guarantor	Social Security No.	<input type="checkbox"/> Individual <input type="checkbox"/> Corp Date of Inc. _____ <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability	
	Home Street Address		<input type="checkbox"/> Tax Exempt	
	City/State/Zip	Phone No.	Please attach copy of certificate	

EQUIPMENT INFORMATION	Dealer Name	Contact (salesman)	Dealer Ph	Dealer Fax
	Dealer Address		() - () -	() -

* If this is for a Manufacturer special rate program, list manufacturer name-

Finance	<input type="checkbox"/> Fair Market Value Purchase Option	Term	Sale Price (or attach sales quote to this page)
Product	<input type="checkbox"/> Fixed Purchase Option \$_____ or _____%		
	<input type="checkbox"/> Dealer Guaranty of Purchase Option		
	<input type="checkbox"/> Conditional Sales Contract	Interest rate %	# Advance
Equipment Description (Manufacturer, Model, S/N)		Sales Tax (if included in financing)	
1	<input type="checkbox"/> New <input type="checkbox"/> Used Year: ____	Downpayment or Trade (Minus)	
2	<input type="checkbox"/> New <input type="checkbox"/> Used Year: ____	Total Amount to Finance	
3	<input type="checkbox"/> New <input type="checkbox"/> Used Year: ____	Payment Amount	

BANK REFERENCES	Bank/Credit Reference Name	Account/Loan Officer	Phone#	Fax#
	Address (City, State)		() - () -	() -
			Checking/ Loan Acct. No.	

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TRADE REFERENCES	Trade References	Contact	Phone#	Fax#
	Address (Street, City, State)		() - () -	() -
			Account#	
	Trade References	Contact	Phone#	Fax#
	Address (Street, City, State)		() - () -	() -
			Account#	

BUSINESS PURPOSE AUTHORIZATION	You, the credit applicant, certify to us that you are applying for credit for a business purpose, and not for personal, family or household purposes.
	I hereby authorize ASV Capital to obtain further information concerning my personal credit standing from any credit bureau, the references herein listed, or any other person. A photostatic copy of this authorization shall be as valid as the original.

X _____
 Print Name & Title Date Signature