



SPECIALTY COFFEE FINANCE

PLEASE FAX BACK COMPLETED APPLICATION TO SKIP WEHNER AT 866.323.7805

www.specialtycoffeefinance.com

ph - 800.930.0570 x-1061

direct - 303.800.1061

fx - 866.323.7805

CUSTOMER INFORMATION:

Form with fields: COMPLETE LEGAL NAME OF BUSINESS, DATE BUSINESS STARTED, BUSINESS TYPE (SOLE PROP, LLC, NON-PROFIT, S-CORP, C-CORP, PARTNERSHIP), MAILING ADDRESS OF BUSINESS, CITY, STATE, ZIP CODE, COUNTY, PHYSICAL ADDRESS OF EQUIPMENT, PHONE NUMBER, FAX NUMBER, CONTACT PERSON, FEDERAL TAX ID#, E-MAIL ADDRESS, TYPE OF BUSINESS, HAS THE BUSINESS OR ANY PRINCIPAL/ OWNER EVER DECLARED BANKRUPTCY?

OWNER/STOCKHOLDER INFORMATION:

Form with fields: PRINCIPAL'S NAME, % OWNERSHIP, TITLE, SOCIAL SECURITY #, DOB, OWN/RENT, HOME ADDRESS, CITY, STATE, ZIP, HOME PHONE (repeated for two owners)

BANK REFERENCE:

Form with fields: BANK NAME, ACCOUNT #, CONTACT, PHONE. Includes instruction: *** PLEASE ALSO PROVIDE US WITH COPIES OF YOUR MOST RECENT THREE (3) MONTHS BANK STATEMENTS ***

LEASE/LOAN REFERENCE:

Form with fields: CREDITOR, ACCOUNT #, CONTACT, PHONE (repeated for two references)

TRADE/SUPPLIER REFERENCE:

Form with fields: COMPANY NAME, ACCOUNT #, CONTACT, PHONE (repeated for two references)

VENDOR/EQUIPMENT INFORMATION:

Form with fields: VENDOR NAME, ADDRESS, CONTACT, PHONE, TYPE OF EQUIPMENT, APPROXIMATE COST, TERM REQUESTED, END OF TERM, AGE OF EQUIPMENT, MODEL YEAR (if used)

By signing below, the undersigned individual(s), who is either a principal of the credit applicant or a personal guarantor of its obligations, authorizes lessor and/or debtor and their affiliates, successors or its designee (and any assignee or potential assignee thereof) to obtain consumer credit reports relating to his/her individual credit history and/or creditworthiness. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. The undersigned also hereby authorizes our banks, trade references, and financial institutions the right to release credit information. In states where permissible, I/we hereby authorize the filing and recording of UCC financing Statements showing the Secured Party's interest in the equipment and grant the Secured Party the right to execute lessee's/debtors name thereto. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in this application.

By: _____ Signature#1: _____ Title _____ Date: _____

By: _____ Signature#2: _____ Title _____ Date: _____