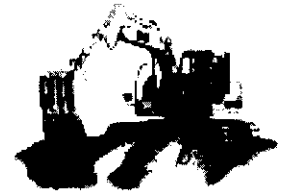


# CREDIT APPLICATION

## VENANGO MACHINERY EQUIPMENT

453 MOODY RUN RD., OIL CITY, PA 16301 PH: 814-758-0062 FAX : 814-677-4119



COMPLETE LEGAL NAME \_\_\_\_\_

DATE \_\_\_\_\_

TYPE OF BUSINESS (PLEASE CHECK ONE)

CORPORATION  PARTNERSHIP  PROPRIETORSHIP  LLC

FEDERAL E.I.N. No# \_\_\_\_\_

MAILING/BUSINESS ADDRESS

STREET \_\_\_\_\_

CITY, STATE \_\_\_\_\_

ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

CELL NUMBER \_\_\_\_\_

COUNTY \_\_\_\_\_

PRINCIPAL/OFFICER/PARTNER

SOCIAL SECURITY No# \_\_\_\_\_

TITLE % OWNED \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

YEARS IN BUSINESS \_\_\_\_\_

HAS A JUDGMENT EVER BEEN FILED AGAINST YOU?  YES  NO

TRADE REFERENCES

ACCOUNT#

TELEPHONE#

CONTACT

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

BANK BUSINESS CHECKING - BANK

ACCOUNT #

PHONE

CONTACT

CURRENT OR PREVIOUS LEASES OR LOANS

ACCOUNT #

PHONE

CONTACT

EQUIPMENT TO BE PURCHASED

YEAR

MAKE

MODEL

AMOUNT TO FINANCE \$ \_\_\_\_\_

TERM \_\_\_\_\_

MONTHS

SUPPLIER

ADDRESS

PHONE

FAX

VENANGO MACHINERY EQUIPMENT 453 MOODY RUN RD. OIL CITY, PA 16301 814-758-0062 814-677-4119

The undersigned individual, recognizing that his or her individual credit history may be a factor in the evaluation of the credit of the applicant, hereby consents to and authorizes the above named business credit provider and any assignee, lender or funding service that may be utilized to obtain and use a consumer credit report on the undersigned as may be needed in the credit evaluation and review process. The undersigned waives any right or claim they would otherwise have under the Fair Credit Report Act in the absence of this continuing consent. Information will be kept confidential. Please fax the completed credit application to FAX# 814-677-4119. I hereby authorize our banks, trades, and personal credit bureaus to release credit information to Venango Machinery Equipment and/or its assignees.

X \_\_\_\_\_