



So Cal Machine Tools

2248 Obispo Ave. Suite #207
Signal Hill, CA 90755

Credit Application

Phone (562) 986-9999
Fax (562) 986-79999
Email: Rene@socal-machinetools.com

Company Information

Company Name "Applicant"		Requested Term (Months)					Business Type	
		<input type="checkbox"/> 24	<input type="checkbox"/> 36	<input type="checkbox"/> 48	<input type="checkbox"/> 60	<input type="checkbox"/> Other	<input type="checkbox"/> LLC <input type="checkbox"/> Corp <input type="checkbox"/> LP <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor	
DBA (if applicable) Address: P.O. Box/ Suite: City/State/Zip: County:			Contact Person 1. 2. 3. 4.			Has the company ever declared bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes Have any of the guarantors ever declared bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes Are there any outstanding lawsuits? <input type="checkbox"/> No <input type="checkbox"/> Yes Are there any outstanding tax obligations? <input type="checkbox"/> No <input type="checkbox"/> Yes		
E-mail			Phone: Fax:			Website www.		
Inside City Limits? <input type="checkbox"/> Yes <input type="checkbox"/> No		Sales Tax Exempt? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach exemption certificate Tax ID:			Years as Owner Year business started		Sales last year \$ Sales YTD \$	
Building <input type="checkbox"/> Rent <input type="checkbox"/> Own		Physical location of equipment			# of employees		% of sales	

Major Customer(s)

Business Banking Relationships

Bank Name			
Account Number			
Phone Number			
Bank Officer			

Principal Information

Name	Title & Ownership %	Social Security
City & State	Phone Number	Email Address

Equipment/Vendor Information

Equipment Description		
Cost \$	<input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Refurbished	Down payment preferred <input type="checkbox"/> \$0 <input type="checkbox"/> 1 or 2 upfront <input type="checkbox"/> Other \$
Supplier	Contact	Phone/Address

Authorization

Applicant warrants all credit and financial information submitted to So Cal Machine Tools and/or its assignees, designees, agents, affiliates or lenders to be true and accurate and hereby authorizes all banking institutions and credit reporting agencies to release necessary information via telephone, mail, internet or facsimile as requested for purposes of making a credit decision. The undersigned individuals specifically authorize SO CAL MACHINE TOOLS and/or its assigns, designees, agents, affiliates or lenders to obtain person credit bureau reports for the making, extension, or renewal of this credit decision or collection of the resulting account. A fax, email or photocopy of this authorization shall be valid as the original.

X _____ Title:
X _____ Title:

Date:
Date:

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Main 562.986.9999

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