



**Financing Options:**

***Equipment Finance Agreement***

A simple loan. Make your payments and at the end of your term you are done.

***Operating Lease - True Lease***

*Fair Market Value Lease*, allows you to write off each payment as an operating expense.

# One Minute Credit Application

**Contact: Steve Carreon – National Accounts**

Email or Fax to: **SCarreon@PartnersCapitalGrp.com** (Fax) 949-916-3901 (O) 949-315-7969

Bus. Name: _____ Address: _____ City: _____ State: _____ Zip: _____ # Years in Business: _____ Tax ID #: _____	Bus. Phone # _____ Cell Phone # _____ Email: _____ Auth Signer: _____ Title: _____ Business Type: Sol Prop – LLC – Corp (Circle One)
Owners Name: _____ Home Address: _____ City: _____ State: _____ Zip: _____	Social Security#: _____ Ownership %: _____ Tax ID #: _____
Dealer Rep: _____ Phone # : _____	Finance Amount: _____ Term Requested: _____

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes Partners Capital Group to obtain from third parties, information it deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes Partners Capital Group, its designee, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this Application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. I authorize all deposit, borrowing, financial and trade information to be released by telephone or fax. A photocopy or fax of this authorization shall be valid as the original. To help fight terrorism and money laundering, Federal Law requires banks to verify the information you provide, which may include driver's license or other documents, to identify you.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_