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CREDIT APPLICATION

Please complete this application and return it to Dave Yates at ClearView Financial

A5

COMPANY INFORMATION

EXACT LEGAL COMPANY NAME: _____
PHYSICAL ADDRESS: _____
MAILING ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
COUNTY: _____
PHONE: () _____ FAX: () _____ FEDERAL ID #: _____
COMPANY WEBSITE: _____
E-MAIL ADDRESS: _____
YEAR BUSINESS STARTED (MM/YY): _____ TYPE OF BUSINESS: _____
 LLC PARTNERSHIP CORPORATION PROPRIETORSHIP

PERSONAL INFORMATION

(PG1) NAME: _____ TITLE: _____ % OWNERSHIP: _____
HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
SOCIAL SECURITY #: _____ PHONE: () _____ ADDITIONAL PHONE: () _____
(PG2) NAME: _____ TITLE: _____ % OWNERSHIP: _____
HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
SOCIAL SECURITY #: _____ PHONE: () _____ ADDITIONAL PHONE: () _____

CREDIT REFERENCES

PRIMARY BUSINESS BANK: _____ CONTACT PERSON: _____
CHECKING ACCT #: _____ SAVINGS ACCT #: _____ LOAN: YES NO #: _____
BANK PHONE: () _____ BANK FAX: () _____

TRADE REFERENCES

FIRM NAME: _____ ACCT #: _____ PHONE: () _____ FAX: () _____
FIRM NAME: _____ ACCT #: _____ PHONE: () _____ FAX: () _____
FIRM NAME: _____ ACCT #: _____ PHONE: () _____ FAX: () _____

EQUIPMENT TO BE LEASED: _____ TOTAL PRICE (US\$): \$ _____
INSURANCE COMPANY: _____ PHONE: () _____ FAX: () _____

PLEASE READ AND SIGN

By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of obligations, provides written instruction to ClearView Financial, Inc. or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit and/or financial/banking information. 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. 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 the above application.

PG1: _____ PG2: _____
SIGNATURE DATE SIGNATURE DATE