SYNERGY FINANCIAL RESOURCES
YOUR CAPITAL EXPERTS

Handi Quilter

APPLICATION FOR FINANCING

833.477.9349
www.SynergyFR.com
SynergyAll@SynergyFR.com

COMPANY INFORMATION

NAME (INCLUDING DBA) _____

START DATE ____ / ____ / ____ EIN _____

BUSINESS TYPE ○ CORP ○ LLC ○ SOLE PROP ○ OTHER

ADDRESS _____

CITY _____ STATE / ZIP _____

PHONE _____ EMAIL _____

GROSS SALES PREV YEAR _____ # OF EMPLOYEES _____

GROSS SALES YTD _____ INDUSTRY _____

CONTACT INFORMATION

NAME _____ TITLE _____

DOB ____ / ____ / ____ EMAIL _____

MOBILE _____ SSN _____

% OWNERSHIP _____ CITIZENSHIP _____

ADDRESS _____

CITY / STATE / ZIP _____

SIGNATURE _____ DATE _____

NAME _____ TITLE _____

DOB ____ / ____ / ____ EMAIL _____

MOBILE _____ SSN _____

% OWNERSHIP _____ CITIZENSHIP _____

ADDRESS _____

CITY / STATE / ZIP _____

SIGNATURE _____ DATE _____

EQUIPMENT

EQUIPMENT _____

FINANCE AMOUNT _____ NEW / USED _____

VENDOR _____

CREDIT RELATED AUTHORIZATION Each individual signing as principal certifies that the information provided in this application is accurate and complete. Each individual signing authorizes Synergy Financial Resources, LLC or any other lending sources to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit request, but also for purposes of reviewing the account, increasing the credit line, taking collection action on the account, and for any other legitimate purpose associated with the account as needed. Each individual signing as principal further waives any right or claim which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent. Furthermore, this will opt you into receiving marketing emails. This Application will apply to any future request for additional financing and all notices, disclosures, consents, and warranties shall be deemed repeated for each future request, unless the applicant submits a new written application. A copy of this authorization shall be as valid as the original.

ECOA NOTICE (TO BE RETAINED BY APPLICANT(S)) Thank you for your business credit application. We will review it carefully and get back to you promptly. If your application for business credit is denied, you have the right to a written statement of the specific reasons for that denial. To obtain that statement, please contact us within 60 days from the date you were notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of your request for the statement. NOTE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating based on race, color, religion, national origin, sex, marital status, age, because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.