

CREDIT APPLICATION

Send to:

Queen City Equipment
1051 Clinton Street
Buffalo, NY 14206

or Fax to: 716-822-5300

Sales Information

Name of your Salesperson: _____ (If you do not have a salesperson enter "None")

Amount of Credit Requested (check one): \$0 - \$5000 \$5,000 - \$25,000 \$25,000+

Customer Information

Current Finance Customer? Current Customer Past Customer New Customer Finance Customer #: _____

Legal Business or Customer Name: _____ D/B/A Name (if any) _____

Type of Business (Check One): Sole P Partnership Corp

Years in Business: _____ yrs.

Number of Routes: _____ Number of Locations: _____ Number of Machines: _____ Annual Sales: _____

Business/Customer Address: _____ City: _____ State: _____ Zip code: _____

Business/Customer Phone: _____ Cell/Alternate Phone: _____ Fax #: _____

E-mail Address: _____

Owner/Authorized Signer 1 Name (Print): _____ Social Security No: _____

Owner/Authorized Signer 2 Name (Print): _____ Social Security No: _____

Credit Information

Check One: Home Owner Renter Number of Years at address: _____

Home Address: _____ City: _____ State: _____ Zip code: _____

Home Phone: _____ Cell Phone: _____ Pager # _____

Nearest Relative not Living with Customer: _____ Relationship: _____ Phone # _____

Employed Outside Vending Business: Yes No

Employment Information (If employed outside business or in business less than one year)

Name of Employer of Signer 1: _____ Salary _____ Position _____ Phone # _____ Yrs Employed _____

Name of Employer of Signer 2: _____ Salary _____ Position _____ Phone # _____ Yrs Employed _____

Trade References

Name: _____ Phone #: _____ Account # _____

Name: _____ Phone #: _____ Account # _____

Name: _____ Phone #: _____ Account # _____

For purchases over \$25,000 we will require the submittal of, 1) last years tax returns and/or 2) current year to date Profit & Loss statement. Please feel free to fax this information to our secure fax line 515-271-8402.

I understand that Witsern Financial Services is relying on this information in extending credit and I warrant it to be true. I hereby authorize WFS or any bank and/or trade bureau or other investigative agencies employed by WFS to investigate the references herein listed or other data obtained from me or any other person pertaining to my credit and financial responsibility. The undersigned authorizes all parties contacted to release credit information requested or its successors or assigns.

Signature _____ (position of signer) Signature _____ (position of signer) Date _____