

APACHE FINANCIAL, LLC

Phone# 717-875-3117 Fax # 717-871-9039

Company Information: Please include two year financial statements and/or tax returns, current interim statement (if available) & owner ('s) personal financial statement(s)

Proprietorship ☐ Partnership ☐ Corporation ☐ Subchapter S Corp ☐ Limited Liability Corp (LLC) ☐ (If LLC, please provide copy of operating agreement)

| | | | |
|---------------------------|--------------|-------------------|------------------------------|
| Company Legal Name: _____ | | Short/DBA: _____ | |
| Physical Address: _____ | City: _____ | State: _____ | Zip: _____ County: _____ |
| Billing Address: _____ | City: _____ | State: _____ | Zip: _____ County: _____ |
| Yr Established: _____ | State: _____ | Fed ID: _____ | E-Mail: _____ Website: _____ |
| Contact: _____ | Phone: _____ | Cell Phone: _____ | Fax: _____ |

Company Ownership: If Corporation-Officers, If LLC-Members, If Partnership or Proprietorship-names of partners/owners:

| | | | |
|---------------------------|--------------------------|--------------------------|--|
| Full Name: _____ | | Social Security #: _____ | |
| Home Address: _____ | City: _____ | State: _____ | Zip: _____ Home Owner: <u>Y</u> / <u>N</u> |
| Phone: _____ | Cell Phone: _____ | Date of Birth: _____ | |
| Spouse's Full Name: _____ | Social Security #: _____ | | |

| | | | |
|---------------------|--------------|--------------------------|--|
| Full Name: _____ | | Social Security #: _____ | |
| Home Address: _____ | Phone: _____ | Ownership%: _____ | |

Equipment Owned:

Credit References:

| | | |
|---------------------|---------------|--------------------------------------|
| Primary Bank: _____ | Acct #: _____ | Contact: _____ |
| Address: _____ | City: _____ | State: _____ Zip: _____ Phone: _____ |

| | | |
|-------------------|---------------|--------------------------------------|
| Finance Co: _____ | Acct #: _____ | Contact: _____ |
| Address: _____ | City: _____ | State: _____ Zip: _____ Phone: _____ |

Work Reference

| | | |
|---------------------|--------------|--------------------------------------|
| Company Name: _____ | #Years _____ | Contact: _____ |
| Address: _____ | City: _____ | State: _____ Zip: _____ Phone: _____ |

COMMENTS:

Applicant certifies that all credit and financial information submitted is true and correct and authorizes any prospective creditor to investigate Applicant's credit worthiness and disclose information and investigation results to each other. The principal signing below hereby personally authorizes Apache Financial, LLC and assignees to order a credit report to verify his/her own credit history, both as part of the initial application approval process and at least annually thereafter during the undersigned's credit relationship with Apache Financial, LLC.

By: _____ Date: _____

Please fax signed application and accompanied financial statements to 717-871-9039.