

Signed By: X

## iGage Credit Application

Submit Completed Apps To: FAX - (800) 288-4959 Email - applications@firstwesternef.com

Customer's Business In	formation: (exac	t legal n	ame re	quired)								
Legal Business Name:								Business P	hone Number:			
Business Address:				City:			State:			Zip Code:		
Bill To Address: (Leave Blank If Same As Above)				City:			State:		Zip Code:			
Ship to Address: (Leave Blank If Same As Above)				City:			State:		Zip Code:			
Structure of Business:					7				Ye	ars in Busin	ess Under	
Controct Name:  Controct Name:					LLC (State of:	)	Governm			Current O	wnership:	
Contact Name:							Title/Pos	ition:				
			/A1/ D1			I=						
Contact Phone Number:		Cell Phor	ne/Alt.Pho	one:		Email Ad	dress:					
				1								
Nature of Business:				Fed. ID.#:				Fax Number:				
Customer's Personal In	formation: (exac	ct legal n	name re	quired)								
I.Owner's Legal Name: Home				Address:				City:				
State:			Zip: S			Social Se	curity#				% Ownership:	
2.Owner's Legal Name:			Home A	ddress:				City:				
State:			Zip:			Social Se	curity#			1	% Ownership:	
Equipment:												
Equipment Description (Please	Attach Invoice if Available)	:										
Equipment Type (91 "A ck Yf2Hf0	UJYfžDck Yf 9ei Jda YbhžYhV	y:										
*If you are sales/use tax exen			-		_							
*Total equipment cost over \$	\$100,000 requires la	st two yea	rs of busi	ness finan	cial statements and	current int	terim stat	ement				
Finance Program:	Tourse	Advance	Data / Fa	stow.	Equipment Cost:			Dunchasa	Ontions			
Program: Term: Advance Payment			Rate / Fa	ctor.	Equipment Cost.		Purchase Options  \$1 Lease		•			
								\$1 Le	ease	☐ EFA	☐ 10% P.O.	
Vendor Contact Information: (For Multiple Vendor Dea									Quotes With Signed Application			
Vendor Business Name:					Web. Address:				Vendor P	hone Num	ber:	
Vendor Address:				City:			State:				Zip:	
Sales Rep. Name:			Sales Rep	o. Phone I	Number:			Sales Rep	. E-mail A	ddress or l	FAX:	
Financing Administered	by First Wester	rn Equip	ment Fi	nance:								
First Western Equipment Finance Financing Made Simple.				Jay Hagen Business Dev. Manager First Western Equipment Finance				Vicki Jenniges Account Manager First Western Equipment Finance				
												Tel: (866) 603-9247 jay.hagen@firstwesternef.com
				Authorization & Owner	c(s) Signaturo(s)			jay.na	agene in stwesteri	iei.com		• ickijeiili
I (we) authorize First Western Equipmen	* * * * *		he financing re	quested in this	application against any credit	reporting burea	u/agency; revie	w any and all inf	ormation or re	ferences disclos	ed in this application; information will	
remain confidential and will not	be disclosed to any third party	outside of cre	dit reporting a	gencies. I (we)	certify that the above informa	tion is complete	and correct a	nd the equipmer	nt is being acqu	ired for comme	cial and not consumer use.	
<b>5</b> '	J.D Y						_					
Signed	a sy: X						Da	ite:				

Date:\_