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CLIENT PROFILE Instructions

Below you will find instructions as to how to file out the CLIENT PROFILE
 The CLIENT PROFILE is designed so all you have to do is type in your information and tab to the next block.

1. Please fill out all information COMPLETELY.
2. Please sign the signature area.
3. Please Fax back to 714-985-1225 or email a scanned copy, PDF signed copy to ryan.bright@providencecapitalfunding.com

Dun & Bradstreet

Rev 11/2012

Application Date: 8/2/2019 12:53 PM

BUSINESS / CLIENT PROFILE

Business Name (Include DBA If Applicable)		Telephone Number	DNB#:
Business Address	City	State, Zip	Federal Tax ID #:
Website (If Applicable):	Email Address (If Applicable):	Lessee Contact:	Cell / Fax/ Other #
Location of Equipment (if different than above)	Date Established?	Current Ownership	Type Of Business
Check One: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation (*see below) <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> LLP			
* State of Incorporation:			

CLIENT INFORMATION

1. Client (Full Legal Name)	Social Security Number:	Birth Date:	Title	Ownership %
Home Address	City	State, Zip	Home Phone Number	
2. Client (Full Legal Name)	Social Security Number:	Birth Date:	Title	Ownership %
Home Address	City	State, Zip	Home Phone Number	
3. Client (Full Legal Name)	Social Security Number:	Birth Date:	Title	Ownership %
Home Address	City	State, Zip	Home Phone Number	

EQUIPMENT Descriptions:

Make/ Model/ Year:	Equipment Price / Term Requested:
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IMPORTANT— APPLICANT READ BEFORE SIGNING

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes Lessor/Secured Party to obtain from third parties, including Applicant's bank, information it deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes Lessor/Secured Party, its designee, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this Application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. I authorize all deposit, borrowing, financial and trade information to be released to Lessor/Secured Party by telephone or fax. A photocopy or fax of this authorization shall be valid as the original. To help fight terrorism and money laundering, the information you provide may be verified to allow us to identify you.

X	X	X
1. Client Signature	2. Client Signature	3. Client Signature
Date: ✓ _____	Date: ✓ _____	Date: ✓ _____

Verbal Approval to pull credit attained from client above on: 8/2/2019 12:53 PM