



Hampton Ridge Financial  
 348 W. Main St. Suite #203  
 Marshall, MN 56258  
 Phone: 866-815-4448  
 Fax: 866-803-1906



# CREDIT APPLICATION

Please Fax Completed Application to: 866-803-1906

COMPANY INFORMATION				
Legal Name			No. of Years in Existence	
Business Address		City	State	Zip
E-Mail Address		Telephone	Federal Tax ID Number	
Business Description		Type of Business <input type="checkbox"/> Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Corporation (State ___) <input type="checkbox"/> Limited Partnership <input type="checkbox"/> State or Local Government		
OWNERS INFORMATION				
Name (Guarantor #1)		Title		Social Security Number
Home Address	City	State	Zip	<input type="checkbox"/> Own <input type="checkbox"/> Rent Home Phone Number
Name (Guarantor #2)		Title		Social Security Number
Home Address	City	State	Zip	<input type="checkbox"/> Own <input type="checkbox"/> Rent Home Phone Number
BANK REFERENCES -- TWO YEAR HISTORY				
Name of Bank / Branch	How Long?	Chkg Acct. #	Telephone	Contact Officer
Name of Bank / Branch	How Long?	Chkg Acct. #	Telephone	Contact Officer
LEASE / LOAN REFERENCES -- SIX MONTH PAY HISTORY (for purchases over \$50,000)				
Name	Original Amount	Loan Acct. #	Telephone	
	\$			
EQUIPMENT DESCRIPTION				
EQUIPMENT DESCRIPTION & ESTIMATED COST		<input type="checkbox"/> NEW <input type="checkbox"/> USED	Date of Purchase:	Cost:
Equipment Description:			Equipment Use:	

The above information, together with any accompanying financial statements, schedules, or other materials, is submitted for the purpose of obtaining credit and is warranted to be true, correct and complete. Hampton Ridge Financial is hereby authorized to investigate (directly or through an agent or nominee) our credit and financial responsibility. By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Hampton Ridge Financial or its designee authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal, or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in the above application. I/we confirm that no petition for bankruptcy has been filed under the company or on an individual basis and that no open liens/judgments exist against the company or on an individual basis.

Guarantor #1	Signature:	Title:	Date:
_____	_____	_____	_____
Print Name Here			
Guarantor #2	Signature:	Title:	Date:
_____	_____	_____	_____
Print Name Here			