ODYSSEY EQUIPMENT FINANCING COMPANY

CREDIT APPLICATION

Salesperson: John Torbenson
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Phone 480-607-6800 • Fax 480-607-6868 • Toll Free 888-607-6800

Legal Name of Business			Contact:
Mailing/Business Address, City, State, Zip			Phone # ( )
Equipment Location (if different)		County	Fax # ( )
Type of Business	Federal ID #	Time in Business: (under current ownership) _____yrs _____mo.	Cell Phone# ( )
☐ Prop. ☐ Prtnrshp. ☐ Corp. ☐ LLC	State Registered in:	Date:	Email Address

Principal/Officer/Partner	Title	% Owner	Social Security	Home Address, City , State, Zip	Own or Rent?

Business Bank (Need 2 yr History)	How Long	Telephone #	Account #	Contact
Bank		( )		
Business Loan(s) (if any)		( )	Loan Amt.(s)	

Trade References (Not C.O.D's)	How Long	Telephone #	Account #	Contact
		( )		
		( )		
		( )		
Landlord (business location):				

Equipment Leases/Loans	How Long	Telephone #	Account #	Loan or Lse. Amt.
		( )		

Equipment Supplier: (if Known)	City, State:	Contact name:	Phone #
Tucson Trux & Equipment Sales LLC	Tucson, AZ		( )

Type of Equipment	Total Equip. Cost
	$

Lease / Contract Term	Residual	New	Used	Recond.

By signing below, the undersigned individual as principal of and/or guarantor for the applicant, authorizes Odyssey Equipment Financing Company, its designee, assigns, or potential assigns, to review his/ her personal credit profile provided by national credit bureaus in considering this Application and for the purpose of the update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. A fax or photocopy of this authorization shall be valid as the original.

BY: _____ _____
Customer's Signature (Title) Print Name

BY: _____ _____
Customer's Signature (Title) Print Name