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## **Equipment Finance Division**

166 Changebrid	lge Rd., P.O. Box 42	J 07045	Phone: (800) 642-3460 or (973) 882-1515			Fax: (877) 386-3710		
BUSINESS INF	ORMATION							
Business Name					Federal ID #			
Address			City			State	Zip	
Equipment A	ddress (if not the s	ame)						
Phone		Fax		Email				
Business Entit	ty: 🗌 Corporation	n 🗌 Proprieto	rship 🗌 Partnership	Limited	Liability Comp	oany 🗌 Limit	ed Liability Partners	
Years in Business Type of Business			Annual Revenue					
VENDOR INFO	ORMATION AND EC	QUIPMENT						
Vendor Name	e			Phone				
Address			City			State	Zip	
Equipment D								
Equipment Amount Term (# of n			m (# of months)					
BANK INFORM	MATION (Include at	t least two yea	rs of bank history)					
	Ba	nk	Account Number	Phon	e Number		Officer	
Checking	3							
Savings								
			<u> </u>			-		
PRINCIPAL IN	FORMATION							
Name				Name				
Address				Address				
City	Sta	ate Zip		City		State	Zip	
Social Security #				Social Security #				
Title				Title				

By signing below, Applicant(s) acknowledge and agree that the statements made in this Application, and in any accompanying financial statements and schedules, are true and correct as of the date given below. Applicant(s) acknowledge that representations made in this Application will be relied on by Creditor to determine Applicant(s)'s creditworthiness and, therefore, Applicant(s) authorize Creditor to make all inquiries Creditor deems necessary and appropriate to verify the accuracy of the information contained herein, including making inquiries of Applicant's vendors. Applicant(s) authorize any person or consumer reporting agency to provide Creditor with any information it may have relating to the Applicant(s). Applicant(s) will promptly notify Creditor of any subsequent changes which would materially affect accuracy of the statements made in this Application. Applicant(s) are aware that any knowing or willful false statements made for purposes of influencing the actions of Creditor can be a violation of federal law, and may result in a fine or imprisonment or both. Applicant(s) acknowledge that they have received a separate copy of The Equal Credit Opportunity Act Notice. Applicant(s) agree that the proceeds of the loan applied for will be used for business purposes only, and not for personal, family or household purposes, and that this Application is not a commitment by the Bank to lend. Applicant(s) agree to receive communications and documents related to this application electronically.

Applicant Signature

Date

## RETAIN FOR YOUR RECORDS NOTICE TO APPLICANT

These are important disclosures for your application. This page is intended for you to keep.

#### IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. By signing below, each application declares that he/she has read and understands the statement above.

### EQUAL CREDIT OPPORTUNITY ACT NOTICE

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Provident Bank, Equipment Finance Division, 166 Changebridge Road, Montville, NJ 07045 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against applicants on the basis of race, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this Bank is: FDIC Consumer Response Center, 1100 Walnut Street, Box 11, Kansas City, Missouri 64106.