DIMENSION FUNDING
Equipment & Software Financing Made Simple

Dimension Funding, LLC
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Commercial Finance Application

LEGAL COMPANY NAME	**DATE ESTABLISHED** (CURRENT OWNERSHIP)	**WEB PAGE ADDRESS**
PRIMARY BUSINESS ADDRESS	**CITY**	**STATE** **ZIP CODE**
DBA	**EMAIL ADDRESS**	**TELEPHONE** / **FAX**
BUSINESS STRUCTURE Check Box or specify Proprietorship ☐ Partnership ☐ Corporation ☐ LLC ☐ OTHER ☐ Specify other: _____	**NATURE OF BUSINESS** **FEDERAL TAX NO.**	**STATE OF INCORPORATION**

GUARANTORS / OWNERS

	(1)	(2)	(3)
NAME			
STREET			
CITY, STATE, ZIP			
RENT OR OWN	☐ RENT ☐ OWN	☐ RENT ☐ OWN	☐ RENT ☐ OWN
DATE OF BIRTH			
SOCIAL SECURITY NUMBER			
TITLE			
% OF OWNERSHIP	%	%	%
SIGNATURE **(I agree to the authorization to obtain consumer credit report below)**			

CREDIT REFERENCES

BANK	**CITY/STATE**	**PHONE NUMBER**	**CONTACT**	**ACCOUNT #**	**TYPE**
LEASES OR LOANS	**CITY/STATE**	**PHONE NUMBER**	**CONTACT**		**ACCOUNT**

VENDOR NAME	**ADDRESS**	**CITY**	**STATE**	**ZIP**
CONTACT NAME & PHONE NUMBER				
EQUIPMENT DESCRIPTION		NEW ☐ USED ☐		TERM REQUESTED
EQUIPMENT LOCATION (IF DIFFERENT FROM ADDRESS ABOVE)				TOTAL INVOICE WITHOUT TAX

Authorization to Obtain Consumer Credit Report

By signing this application, each individual(s), who is either a principal of the credit applicant listed below or a personal guarantor of its obligations, provides written instruction to Dimension Funding, LLC or its designee (and any assignee or potential assignee thereof) authorizing review of his or her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the application of the credit applicant and subsequently for the purposes of update, renewal or extension of such credit and for reviewing or collecting the resulting account. A photo static or facsimile copy of this authorization shall be valid as the original.

Signature: X _____ **DATE** _____

Name (please print): _____ **TITLE** _____