



TOYODA FINANCIAL SERVICES
SPECIALISTS IN EQUIPMENT FINANCING

Contact:
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(866) 505-6851 Fax#: 847-871-4260
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Equipment Finance Credit Application

Business Information

Company Name ("Applicant"): _____ F.E.I.N.#: _____

Address: _____ City, State, & Zip: _____

Phone: _____ Fax: _____ Contact Person: _____

Contact Person Mobile Phone: _____ Contact Person Email: _____

Yrs in Business (Present Ownership): _____ # of Employees: _____ Sales Last Fiscal Year: _____

Company Organization: Corporation "S" Corporation LLC Partnership Proprietorship Other

Corporate or Personal Bankruptcy in Last 10 Years: No Yes, year, explain: _____

Equipment to be Financed or Leased

Equipment Make/Model/Type: _____ New Used/Demo

Equipment Price: \$ _____ Down Payment: \$ _____ **Total to be Financed or Leased: \$** _____

Requested Term: _____ Months End of Term Purchase Option: \$1.00 Buy-out 10% Buy-out FMV or Lease

Vendor: _____ Salesperson: _____ Phone #: _____

Business References

Primary Bank: _____ Account #: _____ Contact/Phone #: _____

Loans or Lines of Credit: _____ Account #: _____ Contact/Phone #: _____

Principal Information Please include a list of additional principles

Name of Principal #1, Title, % of Ownership: _____ DOB: _____ S.S. #: _____

Home Address: _____

Name of Principal #2, Title, % of Ownership: _____ DOB: _____ S.S. #: _____

Home Address: _____

Each individual signing below, who is either a principal or a corporate officer of the credit applicant listed above or a personal guarantor of it obligations, certifies that the information provided in this credit application is accurate and complete. I/we hereby authorize Toyoda Financial Services your agent or its assigns to obtain business, as well as personal information regarding my/our credit history, via banks, trade references, credit reporting companies and any other extenders of credit for purposes of reviewing credit worthiness, increasing credit lines on the account (if applicable), taking collection action on the account, and for any other purpose associated with the account as may be required from time to time. I/we by signing below further waive any right or claim which I/we would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.

X _____
Signature of Principal / Corporate Officer Signer's Printed Name Date

X _____
Signature of Principal / Corporate Officer Signer's Printed Name Date

Fax your completed application to Toyoda Financial Services at (847) 871-4260 or Email to cchip@toyoda.com



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Equipment Finance Questionnaire

What is the Nature of the Business: _____

Please briefly explain the purpose (Replacement or Expansion) of the purchase and comment on any circumstance that will favorably impact the credit risk (i.e. new contracts, customers, management changes, etc.). Replacement Expansion New Contract New Customer Other

Are the principals of the company also the management of the company? How long has the current management been in place?

Is your property owned, mortgaged or leased? If you lease your property, is it from a shareholder?

BUSINESS FINANCIAL INFORMATION:

Projected Revenues 2011: _____ Projected Net Profit/Loss 2011: _____

Gross Revenue 2010: _____ Net Profit or Loss 2010: _____

Gross Revenue 2009: _____ Net Profit or Loss 2009: _____

Gross Revenue 2008: _____ Net Profit or Loss 2008: _____

If your financial statements show losses in any years, please explain.

If your financial Statements show a decline in sales in any year, please explain.

Please list your top customers and what percentage of sales do they represent? Are there new contracts that will affect this percentage?

What are your two year plans (i.e. Percentage of growth) and why?
