



Paratus Supply  
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## CREDIT APPLICATION

**LESSEES FULL COMPANY NAME:** \_\_\_\_\_

EQUIPMENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BUSINESS PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_ CELL PHONE NUMBER \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_ FEDERAL ID NUMBER \_\_\_\_\_ DATE BUSINESS STARTED UNDER CURRENT PRESIDENT/OWNER \_\_\_\_\_

WEB SITE ADDRESS \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

BUSINESS (CIRCLE ONE):    CORPORATION    LIMITED LIABILITY    PARTNERSHIP    PROPRIETORSHIP

**PERSONAL INFORMATION ON OWNER(S):**

NAME \_\_\_\_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

% OF OWNERSHIP & TITLE \_\_\_\_\_ % OF OWNERSHIP & TITLE \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ HOME PHONE # \_\_\_\_\_

**BUSINESS BANK INFORMATION:**

BANK NAME \_\_\_\_\_

PHONE # \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

CONTACT \_\_\_\_\_

**INSURANCE COMPANY INFO:**

COMPANY NAME \_\_\_\_\_

PHONE # \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

CONTACT \_\_\_\_\_

**VENDOR & EQUIPMENT INFORMATION: (WHO ARE YOU BUYING THE EQUIPMENT FROM)**

BUSINESS NAME \_\_\_\_\_

CONTACT \_\_\_\_\_ PHONE # \_\_\_\_\_

EQUIPMENT \_\_\_\_\_

COST \$ \_\_\_\_\_ (WITHOUT TAX)    TERM \_\_\_\_\_    CIRCLE ONE:    NEW    USED/YEAR \_\_\_\_\_

NOTICE TO ALL BUSINESS APPLICANTS: IF YOUR APPLICATION FOR BUSINESS CREDIT IS DENIED, YOU HAVE THE RIGHT TO A WRITTEN STATEMENT OF THE SPECIFIC REASONS FOR DENIAL. TO OBTAIN THE STATEMENT, PLEASE CONTACT FERNWOOD CAPITAL & LEASING, LLC WITHIN 60 DAYS FROM THE DATE YOU ARE NOTIFIED OF OUR DECISION. WE WILL SEND YOU A WRITTEN STATEMENT OF THE REASONS FOR THE DENIAL WITHIN 30 DAYS OF RECEIVING YOUR REQUEST. NOTICE: THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT PROHIBITS CREDITORS FROM DISCRIMINATION AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE (PROVIDED 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 CREDITOR IS THE FEDERAL TRADE COMMISSION, EQUAL OPPORTUNITY, WASHINGTON, D.C. TO SECURE THIS LEASE, LESSEE AGREES TO PAY TO FERNWOOD CAPITAL THE ADVANCE PAYMENT AND/OR SECURITY DEPOSIT AMOUNT ALONG WITH A NON-REFUNDABLE DOCUMENTATION FEE REQUIRED AT THE TIME OF LEASE SIGNING. IF FOR ANY REASON THIS LEASE IS NOT FINALIZED, IT IS SPECIFICALLY AGREED THAT FERNWOOD CAPITAL MAY RETAIN THE ADVANCE PAYMENT AND/OR SECURITY DEPOSIT AMOUNT AND SUCH AMOUNT IS FULLY ISSUED BY FERNWOOD CAPITAL.

By signing below, each undersigned individual, as a principal of and/or guarantor for the Applicant, authorizes Lessor, its designees, assignees and potential assignees, to review his or her personal credit profile and other information as provided by national credit bureaus, banks and third parties, as Lessor in its sole discretion shall deem necessary. Such review shall be made for the purpose of considering this Application and for the purpose of any update, renewal, extension or on future credit submissions to the Applicant or for the collection and review on any resulting accounts with Applicant. A fax or photocopy of this Authorization shall be deemed valid as the original.

DATE \_\_\_\_\_ SIGNATURE: X \_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE: X \_\_\_\_\_