

# Financing Application



## 1. Vendor Information

Vendor/Seller Name _____		Contact Name _____
City/State _____		Email _____
Phone & Fax Number (p) _____ (f) _____		

## 2. Equipment Information

Manufacturer	Model Name & Number	If Used, Year Mfg	Price
Manufacturer	Model Name & Number	If Used, Year Mfg	Price

*Please include a copy of the VSO Customer Quote if available.*

Est. Install Date \_\_\_\_\_

## 3. Transaction Information

Advance Payments	0 1 2 Other _____	Hard Equipment Cost	\$ _____
Purchase Option	\$1 Buyout Fair Market Value Balloon	Freight/Install/Soft	+ \$ _____
Term Requested	12 24 36 48 60	Down Payment	- \$ _____
Promotional Plan	_____	Other _____	\$ _____
Vendor LOC	771656	Amount to Finance	= \$ _____

*Documentation Fee and UCC Filing Fee (if applicable) will be charged on the customer's first monthly payment invoice.*

## 4. Applicant's Business Information

Company's Legal Name _____		Corporate Status		C-Corp	S-Corp	Sole Prop	Partnership	LLC/LLP	Govt
DBA _____		Year Business Started		_____					
Business Street Address _____		Current Ownership Since		_____					
City, State, Zip _____		Bankruptcy Filed?		Yes		No			
Equipment Location <i>If Different Than Above</i> _____		Contact Name		Phone _____					
City, State, Zip _____		Contact Name		Phone _____					
Business Phone Number _____		Account Number & Type		_____					
Business Fax Number _____		Account Number		_____					
Contact Name _____		Contact Name		_____					
Contact Email _____		Contact Name		_____					
Tax Exempt Yes No		Contact Name		_____					
Bank Reference _____		Contact Name		_____					
Trade Reference _____		Contact Name		_____					

*Applicant hereby authorizes the release of credit information to Ingersoll-Rand, or its designee from any source including credit bureau reporting agencies and applicant's bank. I hereby represent that all of the information contained in this credit application is true, correct and complete.*

Print Name _____	Title _____
Signature of Authorized Rep _____	Date _____

## 5. Ownership Information

*Applicant hereby authorizes the release of credit information to Ingersoll-Rand, or its designee from any source including credit bureau reporting agencies and applicant's bank. I hereby represent that all of the information contained in this credit application is true, correct and complete.*

Principal's Name _____	Principal's Name _____
Home Street Address _____	Home Street Address _____
City, State, Zip _____	City, State, Zip _____
Date of Birth _____	Date of Birth _____
Social Security Number _____	Social Security Number _____
Percentage Owned _____	Percentage Owned _____
Signature _____	Signature _____

Transactions under \$50k fax to 800-600-7192. Over \$50k fax to 866-314-9638.  
 Questions? Call 704-655-4809 or Email [Lori\\_Fike@irco.com](mailto:Lori_Fike@irco.com)