



*Capital Peaks*

**Loan Specialist: Jonathan King – P: 310.593.9960 – F: 1.323.347.6856 – jonk@cappeaks.com**

**Account Information**

COMPANY LEGAL NAME: \_\_\_\_\_ TAX ID: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

COMPANY START DATE: \_\_\_\_\_ GROSS ANNUAL SALES: \_\_\_\_\_

STRUCTURE OF OWNERSHIP: \_\_\_\_\_

**Contact Information**

#1 OWNER NAME: \_\_\_\_\_ % OF OWNERSHIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SOC. SEC. #: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

#2 OWNER NAME: \_\_\_\_\_ % OF OWNERSHIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SOC. SEC. #: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

**Purpose of Funds**

USE OF FUNDS: Equipment Leasing / Working Capital / Business Line of Credit

DOLLAR AMOUNT: \_\_\_\_\_ TIMING OF LOAN: \_\_\_\_\_

TERM REQUESTED IN MONTHS: \_\_\_\_\_

I hereby certify that all information contained in this application, and all attachments hereto, are true and complete to the best of my knowledge, and are made for the purpose of obtaining credit. I authorize Capital Peaks, LLC and/or its assign to verify any of the information from whatever source it deems appropriate and I further authorize any of the above references to release credit information to Capital Peaks, LLC or its assigns. I agree to notify you of any material change in the condition of my affairs, and this statement shall be construed by you to be a continuing statement of the conditions of the undersigned until written notice to the contrary is received by you. It is understood that this application shall remain the property of Capital Peaks, LLC, whether or not the loan is granted, and that this constitutes an application only and shall not be binding upon either Capital Peaks, LLC nor the applicant.

PRINT NAME

SIGNATURE

DATE