

## BUSINESS APPLICATION



**REDINGTON CAPITAL**

**Step 1:** Complete Application & Invoice for Equipment  
**Step 2:** Download your last 3 Months Bank Statements  
**Step 3:** Scan your Drivers License and a Voided Check  
**FINAL - Step 4:** Return all the above via email or fax for an Approval!

TEL. (800) 504-2311 EMAIL: info@redingtonfunding.com

### Company Information

Legal Name		Business DBA Name	
Address		City, State, Zip	
Phone		Fax	
Website		Email	
Legal Entity	Corp    Sole Prop    LLC    Partnership    Other	Federal Tax ID#	
Merchant Type	Retail    Restaurant    Service    Internet	Business Start Date	
Business Location	Store Front    Office    Home    Other	Products/Services Sold	

### Owner# 1/Principal Information

### Owner# 2/Principal Information

Name		Name	
Address		Address	
City, State Zip		City, State Zip	
Home Phone		Home Phone	
Mobile		Mobile	
Email		Email	
% of Ownership		% of Ownership	
Date of Birth		Date of Birth	
SSN#		SSN#	

### Landlord Contact Information

Own/Lease?		Lease Start Date		Lease End Date	
Landlord/Mortgage Company		Landlord/Mortgage Company Contact			
Phone		Monthly Rent/Mtg:		\$	

By signing below, the Merchant and its Owners / Principals: (1) certify that all information and documents submitted in connection with this application is true, correct and complete; (2) authorize **REDINGTON CAPITAL** its agents, partners, and lenders, to receive credit reports and any other information regarding the Merchant and its Owners and Principals from third parties, to verify any information provided on the application ; (3) to receive an occasional promotion or offer by email or fax.

By \_\_\_\_\_

By \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_