

# Credit Application

**Please list your sales rep:****Company Information**

Legal Business Name: _____	Federal Tax ID: _____
d/b/a (if applicable): _____	# of Funerals Annually: _____ # of Employees: _____
Entity Type (check one): <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership	Real Estate: <input type="checkbox"/> Owned <input type="checkbox"/> Rented
Street Address: _____	Monthly Payment: _____
City: _____ State: _____ County: _____	Zip: _____
Phone #: _____ Fax #: _____	Years in Business: _____

**Personal Guarantor(s)/Principal(s)**

Applic. #1 Full Legal Name: _____	Phone #: _____
Title (as is registered with Secr. of State): _____	% Ownership: _____
Residence: _____	
City: _____ State: _____	Zip: _____
SSN: _____ Driver's License #: _____	Birth Date: _____
Applic. #2 Full Legal Name: _____	Phone #: _____
Title (as is registered with Secr. of State): _____	% Ownership: _____
Residence: _____	
City: _____ State: _____	Zip: _____
SSN: _____ Driver's License #: _____	Birth Date: _____

**Bank References**

Bank Name: _____	Phone #: _____
Address: _____	Contact Name: _____
City: _____ State: _____	Zip: _____

I make this application to Shields Southeast Sales Inc who may contact a finance company (FC) for a lease finance line of credit and give the above information to the FC in order to obtain this credit. I authorize the FC to obtain information concerning any statements made herein and understand that a credit report may be requested in connection with this application and any subsequent update, renewal, or extension of credit. If I request, I will be informed if a credit report was requested and the name and address of the agency that furnished the report.

To the best of my knowledge, the information I have provided is true.

Applicant #1's Signature: _____ Date: _____	Fax completed application to 678-784-2110 or email april@myhearse.com
Printed Name: _____	
Applicant #2's Signature: _____ Date: _____	
Printed Name: _____	