

Coast Commercial Credit

Credit Application

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|-------------------------|-----------------|-----------------------------------|-------------------------------------|--------------------------------------|---|------------------------------------|---------------------|
| Legal Name of Company | | Amount Requested | | Term Requested | | | |
| Use of Proceeds | | | | Estimated Funding Date | | | |
| Business Address | | City | State | Zip | County | | |
| Equipment Location | | City | State | Zip | County | | |
| Contact / Title | | Phone Number | | Fax Number | | | |
| E-Mail Address | Federal Tax ID# | Years in Business | | Annual Net Profit | | | |
| Landlord Name & Address | | Insurance Company Name & Address | | | | | |
| Type of Business | | Corp. <input type="checkbox"/> | S-Corp. <input type="checkbox"/> | Partner. <input type="checkbox"/> | Proprietor. <input type="checkbox"/> | L.L.C. <input type="checkbox"/> | Number of Employees |

Principal Information For All Owners

| | | | | | |
|-----------|---------------|------------------------------|----------------|------------------------------|-----|
| Full Name | Home Address | | City | State | Zip |
| SSN | Date of Birth | # of Locations Currently Own | % of Ownership | Years Experience in Industry | |
| Full Name | Home Address | | City | State | Zip |
| SSN | Date of Birth | # of Locations Currently Own | % of Ownership | Years Experience in Industry | |
| Full Name | Home Address | | City | State | Zip |
| SSN | Date of Birth | # of Locations Currently Own | % of Ownership | Years Experience in Industry | |

Business Bank References

| Bank | Account Name | Account Number | Contact | Phone Number | Balance |
|------|--------------|----------------|---------|--------------|---------|
| | | | | | |
| | | | | | |

Business Loan / Equipment Lease References

| Supplier Institution / | Account Name | Account Number | Contact | Phone Number | Balance |
|------------------------|--------------|----------------|---------|--------------|---------|
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AUTHORIZATION FOR DISCLOSURE OF CREDIT INFORMATION

Because I have applied to Coast Commercial Credit, LLC for financing, I hereby authorize you to disclose to Coast Commercial Credit or its assignees the personal and/or business information as may be required concerning the above statements or attached enclosures within the framework of the Fair Credit Reporting Act. I hereby represent to Coast Commercial Credit or its assignees that such information is true, correct and complete. A Photostatted copy of this authorization shall be valid as the original. The applicant agrees that Coast Commercial Credit or its assignees have the right to confirm the accuracy of the above credit information and that Coast Commercial Credit or its assignees have the right to accept or reject this credit application. The applicant understands that Coast Commercial Credit or its assignees are relying on the credit application and financial statements submitted by the applicant in making its decision in whether to approve the credit request. The applicant agrees to inform Coast Commercial Credit or its assignees immediately of any matter that will cause any significant change in the applicant's financial condition. The applicant agrees to irrevocably release Coast Commercial Credit or its assignees from any and all liability associated with this transaction. The applicant irrevocably authorizes Commercial Credit or its assignees to execute and file UCC financing statements and/or execute credit request authorizations in any and all names related to this transaction.

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|------------------|--------------|-------------|------------------|--------------|-------------|
| | | | | | |
| SIGNATURE | TITLE | DATE | SIGNATURE | TITLE | DATE |
| | | | | | |
| SIGNATURE | TITLE | DATE | SIGNATURE | TITLE | DATE |

Coast Commercial Credit, LLC

536 E. Lehigh Drive, Deltona, FL 32738

Toll Free Telephone: 1-800-400-0365, Toll Free Facsimile: 1-888-400-0365