



Applicant Information (If more than one Applicant, copy form and complete for each)

Legally Registered Business Name		Trade or DBA Name		Primary Contact	Cell Phone
Address (PO Box is not acceptable)			City State and Zip	Email	Business Phone
Type of Business <input type="checkbox"/> Proprietorship <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Municipality <input type="checkbox"/> C-Corporation <input type="checkbox"/> Other: _____		Nature of Business	Federal Tax ID or SSN		
		Year Established	Gross Annual Revenues \$		
		Has the Applicant, Beneficial Owner(s), Guarantor(s), or Principal(s) of the Applicant ever been convicted of a Felony? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please explain on separate document		Has the Applicant, Beneficial Owner(s), Guarantor(s), or Principal(s) of the Applicant ever filed for bankruptcy? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please explain on separate document	
Current Fleet Size: Ambulances _____ Fire _____ Other _____					

Ownership and/or Guarantor Information for Applicant (If more than three, copy form and complete for each)

Name	Address including City State Zip	SS# or FEIN#	Birth Date	% Ownership	Providing Guaranty? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a US citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name	Address including City State Zip	SS# or FEIN#	Birth Date	% Ownership	Providing Guaranty? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a US citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name	Address including City State Zip	SS# or FEIN#	Birth Date	% Ownership	Providing Guaranty? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a US citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No

Equipment Information

Location Address including City State and Zip					County
Year	Manufacturer	Model	Serial/ VIN#		
Finance Term in Months	Payment Amount \$	Finance/Lease Plan: <input type="checkbox"/> Loan <input type="checkbox"/> FMV <input type="checkbox"/> Full Pay Out \$100 <input type="checkbox"/> FPPO \$ _____ <input type="checkbox"/> TRAC Lease			
Total Cost: \$	Down Payment: \$	Trade In: \$	Net to Finance: \$	Replacement <input type="checkbox"/> Addition <input type="checkbox"/>	

Credit References

Finance Company Name	Account Number	Contact	Phone
Trade Supplier	Account Number	Contact	Phone

Authorization for Disclosure of Business and Personal Credit Information

"You," the "Applicant" (both terms include the business entity as well as all of the individuals named above), certify to us that you are applying for credit for business reasons, and not for personal, family or household purposes. Applicant authorizes REV Financial Services, Inc and its assigns or designees to obtain information from others concerning Applicant's credit and trade standing, including Applicant's personal credit report, and other relevant information impacting this application, and if the Lease is approved, from time to time during the term of the Lease. In addition to the information requested on this application, may subsequently request additional information from Applicant. IMPORTANT INFORMATION: Except as otherwise prohibited by law, you agree and consent that the affiliates in REV Financial Services, Inc (collectively "REV Financial Services, Inc") may share with each other all information about you that REV Financial Services, Inc has or may obtain for the purposes, among other things, of evaluating credit applications or offering you products or services that REV Financial Services, Inc believes may be of interest to you. Under the Fair Credit Reporting Act there is certain credit information that cannot be shared about you (unless you are a business) if you tell REV Financial Services, Inc by writing to REV Financial Services, Inc Attention: Office of Consumer Privacy, P.O. Box 4068, Kalamazoo, MI 49009. Please provide your name, address, social security number and account number(s). As an authorized agent of the applicant company, you represent that you have reviewed this document and the information herein is true, correct and complete. A photo static copy of this authorization shall be as valid as the original. Ohio Residents Only: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law. New York Residents Only: A consumer report may be requested in conjunction with this application. Upon your request, you will be informed whether or not a consumer report was requested and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. Subsequent consumer reports may be requested or utilized in connection with an update, renewal or extension of the credit for which this application is made. Vermont Residents Only: You authorize REV Financial Services, Inc to obtain credit reports about you now and in the future for all legitimate purposes associated with this application or the account including, but not limited to: (a) evaluating this application; and (b) renewing, reviewing, modifying, and taking collection action on the account. Important Information About Procedures for Opening A New Account: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, business documents, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Owner #1 of Applicant - Print Name	Owner #1 of Applicant - Signature	Date
Owner #2 of Applicant - Print Name	Owner #2 of Applicant - Signature	Date
Owner #2 of Applicant - Print Name	Owner #2 of Applicant - Signature	Date

Joint Intent: (Please Initial)

If a Guaranty is being provided for this application or there is more than one Applicant, the following must be initialed by BOTH the Applicant(s) and all Guarantors. By initialing, we confirm that we intend to apply for joint credit or to jointly and severally guarantee credit.

Applicant(s) _____ / _____ / _____	Joint Party (Guarantor and/or Co-Applicants) _____ / _____ / _____
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