

EARTHSAVER EQUIPMENT FINANCING APPLICATION

Financing provided by DADE Capital Corp

B U S I N E S S	BUSINESS NAME/LESSEE				TELEPHONE	FAX
	ADDRESS (STREET)		CITY	STATE	COUNTY	ZIP CODE
	TYPE OF BUSINESS		YEAR ESTABLISHED	YEARS AS CURRENT OWNER	FED. TAX ID NO.	
	LOCATION OF EQUIPMENT (STREET)		CITY	STATE	COUNTY	ZIP CODE
	ANNUAL REVENUES	NUMBER OF EMPLOYEES	ARE THERE ANY OUTSTANDING LAWSUITS? <input type="checkbox"/> YES <input type="checkbox"/> NO		HAS THE COMPANY EVER DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO	
	COMPANY WEB SITE		EMAIL ADDRESS		ARE THERE ANY OUTSTANDING TAX OBLIGATIONS? <input type="checkbox"/> NO <input type="checkbox"/> YES	
	BUSINESS STRUCTURE <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> OTHER _____					

O W N E R S H I P	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.	
	HOME ADDRESS (STREET)		CITY	STATE	ZIP CODE	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	DATE OF BIRTH
	ARE YOU A US CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU A RESIDENT ALIEN? <input type="checkbox"/> NO <input type="checkbox"/> YES	HAVE YOU EVER DECLARED BANKRUPTCY? <input type="checkbox"/> NO <input type="checkbox"/> YES		GROSS INCOME	NET WORTH	CELL PHONE NUMBER
	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.	
	HOME ADDRESS (STREET)		CITY	STATE	ZIP CODE	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	DATE OF BIRTH
	ARE YOU A US CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU A RESIDENT ALIEN? <input type="checkbox"/> NO <input type="checkbox"/> YES	HAVE YOU EVER DECLARED BANKRUPTCY? <input type="checkbox"/> NO <input type="checkbox"/> YES		GROSS INCOME	NET WORTH	CELL PHONE NUMBER

B A N K S	PRIMARY BUSINESS BANK	BRANCH	FAX	TELEPHONE	
	NAME ON ACCOUNT	CHECKING ACCT. NO.	CONTACT		DATE OPENED
	BANK	BRANCH	FAX	TELEPHONE	
	NAME ON ACCOUNT	CHECKING ACCT. NO.	CONTACT		DATE OPENED
	LENDER/LESSOR ON OTHER LOANS	EQUIPMENT TYPE	CONTACT	TELEPHONE	
	NAME ON ACCOUNT	LOAN / LEASE ACCT. NO.	ORIGINAL BALANCE	CURRENT BALANCE	

EQUIPMENT (YEAR MAKE MODEL)	EQUIPMENT COST	DESIRED TERM <input type="checkbox"/> 36M <input type="checkbox"/> 48M <input type="checkbox"/> 60M <input type="checkbox"/> 72M
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By signing below:

1. You and the Company state that all information provided on this application is true and correct, is not misleading, and does not contain any material omissions.
2. You authorize DADE Capital Corp. or its designee (and any assignee or potential assignee thereof) to obtain consumer reports on each of owner or officer listed from consumer reporting agencies in considering this application, and in conjunction with any extension of credit to the company for review, update, renewal or collection. DADE Capital Corp. may obtain business reports on company.
3. You represent to us that each of you is authorized to sign this application on behalf of company, that each of you have the title indicated above, and that no other person(s) is/are required to sign this application in order to bind the company or to make any of the representations, agreements, or other information in this application accurate, effective and legally binding.
4. All owners of 20% or more and other principal representatives must sign this application. If there are more than two signers, please copy this application, complete and sign this section, and attach the copy to this application.
5. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please call DADE Capital Corp. at 800-823-9688.

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