



7600 Parklawn Ave, Suite 384
 Minneapolis, MN 55435
 (866) 539-3698 Ext. 5 – Phone
 (866) 539-3751 – Fax
fleet@merchantsbank.com - Email

CUSTOMER APPLICATION

Information provided in this application is correct to the best of my knowledge. I understand this application will be retained whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. I authorize all past or present creditors to release any and all necessary credit information. I understand and agree that this document may be transmitted to creditors electronically by fax or other means. I hereby authorize those creditors to release information as detailed above based on this electronically transmitted document.

 Signature Date

 (please print or type individuals name) (Title – corporation only)

 Signature Date

 (please print or type individuals name) (Title – corporation only)

Customer Information

| | | | | |
|--|-----------------------------|--|------------------------|--------------|
| Name(s) Individual or legal name of corporation, partnership or organization | | Contact | Title (if corporation) | |
| Physical Address | | Phone number | Mobile phone number | |
| City | State | County | Zip Code | Fax number |
| Billing address | | | | |
| City | State | County | Zip Code | Phone number |
| Business Structure: <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Cooperative | | | | |
| State of Incorporation | Date of Incorporation | Briefly describe operation | | |
| Years in business | Total sales or gross income | Federal ID number (or Social Security number, if individual) | Fiscal year end | |
| Insurance Company | | Contact Name | Phone Number | |

Financial Information

| | | | | | |
|--|--------------------------|--------------------------|---|--------------------------|--------------------------|
| Bank /Finance Co. | Contact | Phone Number | # of Years | | |
| Checking Account # \$ | Loan Account # \$ | Savings # \$ | | | |
| Bank/Finance Co. | Contact | Phone Number | # of Years | | |
| Checking Account # \$ | Loan Account # \$ | Savings # \$ | | | |
| | Yes | No | | Yes | No |
| Are there any unsatisfied judgments against you? | <input type="checkbox"/> | <input type="checkbox"/> | Are any accounts past due? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you been declared bankrupt in the last ten years? | <input type="checkbox"/> | <input type="checkbox"/> | Does anyone else own an interest in the property listed? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you a defendant in any pending law suit? | <input type="checkbox"/> | <input type="checkbox"/> | Are you a co-maker, co-signer, or guarantor on any financial obligations? | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered "Yes" to any of the above questions, please give details (Use separate sheet if necessary).

Principal Information

| | | |
|------------------|------------------|-------------------|
| Principal's Name | Home Phone | Social Security # |
| Address | City, State, Zip | % Ownership |
| Principal's Name | Home Phone | Social Security # |
| Address | City, State, Zip | % Ownership |

Credit References

| | | | | |
|----------|----------------|--------------|------------------|----------------|
| Creditor | Contact Person | Phone Number | City, State, Zip | Account Number |
| Creditor | Contact Person | Phone Number | City, State, Zip | Account Number |