

Date \_\_\_\_\_  
Acct. Rep \_\_\_\_\_  
Dealership \_\_\_\_\_  
Contact \_\_\_\_\_  
Phone \_\_\_\_\_



200 Mamaroneck Ave, Ste 302  
White Plains, NY 10601  
Phone: (855) 339-9240  
Dedicatedfundingny.com

### COMPANY INFORMATION

Complete Legal Name: \_\_\_\_\_  
Physical Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Registered & Insured Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Garage Location \_\_\_\_\_ Fleet Size \_\_\_\_\_  
Business Structure: Sole Proprietorship  Partnership  LLC  Corporation   
Date of Incorporation Under Current Ownership: \_\_\_\_\_ Federal Tax ID Number: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

### OWNER'S INFORMATION:

Legal Name: \_\_\_\_\_  
Title \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
Physical Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Annual Income: \_\_\_\_\_ % of Business Owned: \_\_\_\_\_  
U.S. Citizen: Yes  No

### ADDITIONAL OWNER'S INFORMATION:

Legal Name: \_\_\_\_\_  
Title \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
Physical Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Annual Income: \_\_\_\_\_ % of Business Owned: \_\_\_\_\_  
U.S. Citizen: Yes  No

### VEHICLE OR EQUIPMENT INFORMATION:

Choose: Lease  Loan

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Mileage \_\_\_\_\_ Term Requested \_\_\_\_\_  
Selling Price \_\_\_\_\_ Down Payment \_\_\_\_\_ Amount Financed \_\_\_\_\_ Balloon \_\_\_\_\_

**Company Bank References:** Submit the last 3 months business bank statements. (If more than one business account please provide information).

Banking Institution(s)	Account Number	Contact Name	Contact Number

**SIGNATURES:**

**Certification:** Each of the undersigned represents to Dedicated Funding LLC (hereafter known as "DF") and to DF's actual and potential agents, participants, processors, attorneys, insurers, servicers, successors, and assigns that: (1) this application is for business and not primarily for personal, family, or household purposes; (2) the information provided in this application and in the documents, schedules, reports, statements, and/or other information provided to DF in connection with this application is true and correct as of the date thereof and hereof; (3) DF and its agents, participants, processors, attorneys, insurers, servicers, successors, and assigns may retain and continuously rely on the information contained in this application, and each of the undersigned agrees to amend and/or supplement the information provided in or in connection with this application if any information should change prior to the closing of any loan; and (4) the transmission of this application containing a facsimile of any signature, or a digital signature, is as effective, enforceable, and valid as if a paper version of this application were delivered containing an original, wet-ink signature.

**Authorization:** Each of the undersigned authorizes DF and its servicers, successors, and assigns to request, receive, investigate, verify, and re-verify any information obtained or discovered in connection with this application, and any credit reports and other financial information regarding any applicant and its owners, affiliates, and offices, as necessary or appropriate, and any information or data relating to any property or loan; and the undersigned, and each of them, further authorize DF to file financing statements describing all now owned or hereafter acquired equipment and all other property that may be the subject of any loan with DF.

**Equal Credit:** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission 1100 Walnut Street, Box 11, Kansas City, Missouri, 64106.

**DF MAY ORALLY NOTIFY APPLICANT OF ACTION TAKEN WITH RESPECT TO AN APPLICATION.** Applicant has the right to a statement of specific reasons for action taken within 30 days, if the statement is requested within 60 days of notification of such action taken. This statement may be requested from DF/Underwriting, Attn: Request for Adverse Action Notice, Dedicated Funding 860 East 4500 South, Suite 312, Salt Lake City, Utah 84107.

**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, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

**ALL INDIVIDUALS LISTED AS OWNERS, OFFICERS, OR GUARANTORS MUST SIGN (ATTACH SEPARATE SHEET IF NECESSARY)**

\_\_\_\_\_  
**COMPANY**

**SIGNATURE:** \_\_\_\_\_  
**NAME:** \_\_\_\_\_  
**TITLE:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_  
**NAME:** \_\_\_\_\_  
**TITLE:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_