



CHARTER CAPITAL

CREDIT APPLICATION

BUSINESS INFORMATION

COMPANY LEGAL NAME					CONTACT		DATE
DBA OR TRADESTYLE					WEBSITE		
ADDRESS			CITY	COUNTY	STATE	ZIP	PHONE #
EQUIPMENT LOCATION ADDRESS (IF DIFFERENT)			CITY	COUNTY	STATE	ZIP	FAX #
CORPORATE SECRETARY				STATE OF ORGANIZATION		STRUCTURE OF OWNERSHIP	
						<input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> L.L.C <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> SUB CHAPTER S <input type="checkbox"/> CORPORATION <input type="checkbox"/> PUBLIC	
DATE EST.	YRS OWNERSHIP	YRS/CURR ADD	# OF EMPLOYEES	FED TAX ID #			

OWNERSHIP INFORMATION

PRINCIPAL'S NAME			TITLE	% OF OWNERSHIP	E-MAIL ADDRESS
HOME ADDRESS			<input type="checkbox"/> RENT HOW LONG <input type="checkbox"/> OWN	SOC SEC #	HOME PHONE #
PRINCIPAL'S NAME			TITLE	% OF OWNERSHIP	E-MAIL ADDRESS
HOME ADDRESS			<input type="checkbox"/> RENT HOW LONG <input type="checkbox"/> OWN	SOC SEC #	HOME PHONE #

TERM REQUEST

LEASE AMOUNT	LEASE TERM	END OF LEASE OPTION			
\$	MONTHS	<input type="checkbox"/> \$100.00	<input type="checkbox"/> 10%	<input type="checkbox"/> FMV	<input type="checkbox"/> PUT

BANKS / LENDERS

BANK/LENDER NAME			NAME ON ACCOUNT		
CONTACT NAME	PHONE #	FAX #	DATE OPENED	AVERAGE BALANCE	
				\$	
<input type="checkbox"/> CHECKING ACCT. #		<input type="checkbox"/> LEASE ACCT. #			
<input type="checkbox"/> SAVINGS ACCT. #		<input type="checkbox"/> LOAN ACCT. #			

APPLICANTS AUTHORIZATION - BUSINESS AND CREDIT AUTHORIZATION - OWNERS

The above information, together with any accompanying financial statements, schedules, or other materials, is submitted for the purpose of obtaining credit and is warranted to be true, correct and complete. Media Capital Associates, LLC dba CHARTER CAPITAL is hereby authorized to investigate (directly or through an agent or nominee) our credit and financial responsibility. We understand that such investigation may include seeking information as to the background, credit and financial responsibility of our officers and principals (or any of them).

By signing below, the undersigned individual, who is either a principal of the credit applicant or a guarantor of it's obligations, provides this written instruction to Media Capital Associates, LLC dba CHARTER CAPITAL, it's nominees or assigns, authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit or additional credit and for reviewing and collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signing below, I/we affirm our identity as the respective individuals identified in the related application.

SIGNATURE	NAME & TITLE	DATE
SIGNATURE	NAME & TITLE	DATE

If your application for commercial credit is denied, you have the right to a written statement of the specified reasons for denial. To obtain the statement, please write our Managing Partner, Media Capital Associates, LLC dba CHARTER CAPITAL, 7975 North Hayden Rd, Suite D-365, Scottsdale, AZ 85258 within 60 days of the date you are notified of our decision. We will send you a written statement detailing our reasons for decline within 30 days of receiving your request. 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 (providing the applicant has the capacity to enter into a binding contract): because all or part of the applicants income derives from an 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 is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.