

# FINANCING APPLICATION

**STEM Supplies**  
 2525 Lemond St SW, PO BOX 998  
 Owatonna, MN 55060-0998

Stem-Supplies.com  
 Phone 1-855-826-4540  
 Fax 1-855-826-5677



## INTERNAL USE ONLY

VENDOR NUMBER  
126131

VENDOR NAME  
STEM Supplies

PHONE NUMBER  
1-855-826-4540

FAX NUMBER  
1-855-826-5677

### ① PLEASE COMPLETE IN FULL

LEGAL COMPANY NAME

ADDRESS

CITY

STATE

ZIP

PHONE

FED. TAX I.D. #

CONTACT PERSON

E-MAIL ADDRESS

TYPE OF BUSINESS

STATE OF INCORPORATION

# OF YEARS IN BUSINESS UNDER CURRENT OWNERSHIP

# OF EMPLOYEES

DESCRIPTION OF BUSINESS

BILLING ADDRESS (IF DIFFERENT FROM ABOVE)

CITY

STATE

ZIP

### ② PLEASE COMPLETE IN FULL

NAME OF OWNER #1

TITLE

NAME OF OWNER #2

TITLE

ADDRESS

CITY/STATE/ZIP

ADDRESS

CITY/STATE/ZIP

SOCIAL SECURITY #

DATE OF BIRTH

OWNERSHIP %

SOCIAL SECURITY #

DATE OF BIRTH

OWNERSHIP %

### ③ PLEASE COMPLETE IN FULL

DESIRED PAYMENT AMOUNT

LEASE TERM (circle one)

**24 / 36 / 48 / 60 months**

### ④ PLEASE ATTACH A COMPLETED ORDER FORM.

Each individual signing below certifies that the information provided in this credit application is accurate and complete. Each individual signing below authorizes you or any assignee or funding source which may be utilized (collectively referred to as "Lenders") to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit requested, but also for purposes of reviewing the account, increasing the credit line on the account (if applicable), taking collection action on the account, and for any other legitimate purpose associated with the account as may be needed from time to time. Each individual signing below further waives any right or claim which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.

**X**  
OWNER #1 – SIGNATURE

SIGNER'S PRINTED NAME

DATE

**X**  
OWNER #2 – SIGNATURE

SIGNER'S PRINTED NAME

DATE

#### ECOA NOTICE (TO BE RETAINED BY APPLICATION)

Thank you for your business credit application. We will review it carefully and get back to you promptly. 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 that statement, please contact us within 60 days from the date that you are notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of your request for the statement. NOTICE: 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 our compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

#### IMPORTANT CUSTOMER INFORMATION

To help the government fight the funding of terrorism and money laundering activities, Federal law requires financial institutions to obtain, verify, and record identifying information on new customers. The personal data requested above will allow us to identify each person signing this application. We may also ask for copies of drivers' licenses or other identifying documents.

**FAX completed page and order (or request for quote) to 1-855-826-5677 • ATTN: FINANCING APPLICATION**