

Vendor Transaction Referral Application

Thank you for considering Patriot Funding Corp. for equipment lease financing for your customers. Please read this application carefully and fill out the information below.

APPLICANT		
Legal Name: Tax I	ID No.(EIN):	
Type of Organization: State of Organization:		
Business Address:Street	City State Zip	
Business Phone: () Business Fax: ()) Website Address:	
Yrs. in Business: No. of Employees: Total sales volume in most recent fiscal year: \$		
Total lease volume funded in most recent fiscal year: \$ Ave. cost of Equipment per Lease: \$		
Target customers: Equipment Types:		
PRINCIPALS		
Name: Title:	Name:Title:	
BANK CHECKING/SAVINGS REFERENCE		
Name of Bank:	Acct #:	
Contact:	Phone: ()	
TRADE REFERENCE	TRADE REFERENCE	
Name: Acct #:	Name: Acct #:	
Contact: Phone:	Contact: Phone:	

ACH INFORMATION		
Name on Account	Account Number	
Bank Name	ADA Routing Number	

AUTHORIZATIONS

Vendor: The officer signing for the Vendor certifies that (i) s/he has the authority to complete, execute and deliver this Application on behalf of the Vendor, (ii) that the information contained herein is correct (iii) that Patriot Funding Corp., is authorized to obtain, and all banks, financial institutions, trade references, credit reporting agencies and others having any credit or financial information regarding Vendor are authorized to release to Patriot Funding Corp., all credit and financial information regarding Vendor requested by Patriot Funding Corp. in order to evaluate this application and, upon approval of the Vendor, to periodically review the Vendor and for any other lawful purpose associated with the business relationship between Vendor and Patriot Funding Corp.

By:		
-	(Signature)	
Name [.]		

Title:_