



Date:		

## 1525 Endeavour Place #O Anaheim Ca.92801 Phone 714-635-9264 Fax 714-635-9442 www.PowerPlusOnline.com

Print Name:

Date:

Tell us about your	company:								
Legal Name:						County:			
Bus. Mailing Address: _						Bus. Phone	e#(	)	
_						Fax #:	(	)	
Type of Business:	Proprietorship	Partnership	Co:	rporation	LLC	Cell #:	(	)	
What is your Federal ID	#?			What	is your D&B#	?			
My E-Mail is		Years in Business_							
Tell us about the o	wnership of you	r company:							
The Full Name of the P	rimary Owner :								
My Title is:	_Owner	_Partner	President	Me	mber I	Own	% of	this business.	
Owner #1 Address :					Soc.	Sec. #			
Date of Birth		Pho	one # ( )_						
The <b>Full Name of the S</b>	econd Owner :								
My Title is:	Owner	_Partner	President	Me	mber I	Own	% of	this business.	
Owner #1 Home Addres	s:					Soc. Sec. # _			
Date of Birth				Home	Phone # (	)			
Tell us about the B	ank and Credit	References of y	our compa	ny:					
Our <b>Primary Business</b> (	Checking/Savings A	account: (Name of	Bank)		· · · · · · · · · · · · · · · · · · ·				
Account Number:		_ Bank Phone # : (	: ( ) Officer's Name:						
Our Best Business Cred	lit Line is with: (Na	me of Company or l	Bank)						
Account Number:		_Phone Number: (	)	Contact Name:					
Our Second <b>Best Busine</b>	ess Credit Line is w	ith: (Name of Comp	pany or Bank)						
Account Number:		_Phone Number: (	)		_ Contact Name	e:			
<b>What Equipment o</b>	do you want and	whom do you v	want to get	it from?					
We need the following e		-				At a co	st of: \$		
Credit Review Aut									
By signing below, the undersigning or its designees (and any a profile in considering this appli	ned individual(s) who is ei ssignee or potential signee cation and subsequently for	thereof) authorizing revier the purposes of update,	ew of his/her person renewal or extension	nal credit profile fi on of such credit a	rom a national credit nd for reviewing or	t bureau. Such author collecting the resultin	ization sha g account.	all extend to obtaining a cre	
Signature:	nu as the original. By sign	e original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in the above application.  Signature:							

Print Name:

Date: