



**DEALER APPLICATION**

**A. BUSINESS INFORMATION**

Business Name:		Federal Tax ID:	
Address (Street, City, State Zip):			
Bus. Phone: ( )		Fax: ( )	
Contractor State License #:	G.E. Merchant #:	Yrs. In Business:	
Email Address:		Contact Name:	

**B. PRINCIPAL INFORMATION (OWNER OR PARTNER ONLY)**

Name:	Title:	Social Security Number:
Home Address (Street, City, State, Zip):		Home Telephone Number:

**C. SUPPLIER REFERENCE:**

Supplier Name:	Contact Name:
Phone Number:	Fax Number:

**D. BUSINESS BANKING INFORMATION:**

Bank Name:	Bank Transit Number (See Image Below):
Contact Name: Phone: ( )	Bank Account Number (See Image Below) <b>No personal accts:</b>

ABC COMPANY 777 ANY STREET ANY TOWN USA 54321	Date _____ 2002
Pay to the Order of _____	\$ <input type="text"/>
ANY BANK NAME	
For _____	
'002002  '1	:123456789 :
	0123456789  '1

**Please check on of the following boxes: ( This section is mandatory, if not checked processing may be delayed.)**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please give credit decision to Representative in the home.	Please email credit decision to the Central Office.	We do not wish to enroll in the Second Look Program.

***Please Fax to: 1-866-257-8122***  
***Email address is mandatory to participate.***



## E. TERMS & CONDITIONS

This dealer agreement application is submitted to obtain credit approval privileges on behalf of the person listed in Section B on the page hereof ("application") ("applicant") and I/we (hereinafter the individuals signing below are referred as "I" or "my" or "me") certify that I have read the above provisions and all information provided herein is true and correct. I have the power and authority to execute and deliver this application and to enter into and consummate the dealer agreement on behalf of the applicant, and I have been duly authorized to bind the applicant, by my signature below, to all terms and conditions of the dealer agreement. The number shown on this form is the correct taxpayer identification number for the entity. I acknowledge that the application is subject to approval by SFC, LLC.

By signing below, I authorize and/or confirm as follows:

- (i) I authorize Service Finance Company (SFC) or its agents, to retain possession of the application, to rely on the information and statements herein to check and verify both my credit and the credit history of the business and any of its other principals, officers, partners, or directors, to secure follow up credit reports, and to exchange information about the entity and this account with creditors, credit bureaus, and other proper persons;
- (ii) By submitting this application, dealer agrees that SFC may share any and all dealer information provided or obtained in connection with this application, including subsequent dealer financial information provided to, or obtained by SFC and may use such information for all purposes in connection with the evaluation and administration of any credit facility requested by or provided to dealer.
- (iii) I authorize the applicant's bank and any other listed references to release and/or verify information to SFC at any time;
- (iv) I authorize and permit SFC to send email and/or fax communications to the applicant to the email addresses and fax numbers listed in sections A & F (or to any addresses provided in the future) regarding our credit financing relationship or other matters; and
- (v) I certify, represent, and acknowledge that the applicant has agreed to abide by all terms and conditions of the dealer agreement, including the ACH authorization contained therein, and that if and when SFC approves this application, upon receipt of notice of such approval, the applicant will, without further action, be bound to all of the terms and conditions of the dealer agreement and any operating guidelines which shall be issued by SFC from time to time.
- (vi) I certify, represent and warrant that this application has been duly executed and delivered by me on behalf of the applicant, and that the execution and delivery of this application and the consummation of the transactions contemplated by the dealer application have been authorized by all necessary corporate action and do not and will not conflict with the organizational documents of the applicant.

**Carefully read the SFC Dealer Agreement and the Signature Statement above prior to signing this application, since your signature below will bind the applicant to such agreement.**

Each of the undersigned hereby certifies that he/she has read the Signature Statement above, that the statements therein are true and correct, and that he/she is authorized by the applicant to sign this application and to bind the applicant, by his/her signature below, to all of the terms & conditions of the SFC Dealer Agreement.

**By: X** \_\_\_\_\_

**Authorized Signature** **Date**

## F. ADDITIONAL LOCATION

Additional Location Name:	
Location Address (Street, City, State, Zip):	
Location Phone:	Location Fax:
Email Address:	Federal Tax ID # (EIN #):
Bank Transit # (if different):	Bank Account # (if different):

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***Email address is mandatory to participate.***