



# CREDIT APPLICATION

## CHURCH INFORMATION

Business Name		DBA			
Address		City		State	Zip
Federal ID Number	Yrs. In Business	Tax Exempt Cert. #	# of Employees	Phone	Fax
<input type="checkbox"/> Corporation <input type="checkbox"/> Public Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Municipal <input type="checkbox"/> Non Profit <input type="checkbox"/> Tax Exempt					

## GOVERNING BODY

	PRINCIPAL #1	PRINCIPAL #2	PRINCIPAL #3
Name			
Address			
City			
State/Zip			
Phone			
Position			
How Long There			
Driver License #			
Social Security #			

## BANK REFERENCES

BANK NAME	AVG. BALANCE	CONTACT	ACCOUNT NUMBER	PHONE	FAX
1					
2					

## TRADE REFERENCES

TRADE NAME	CONTACT	ACCOUNT NUMBER	PHONE	FAX
1				
2				
3				

## COMPARABLE LEASE OR LOAN REFERENCES

BANK OR LEASE COMPANY	CONTACT	ACCOUNT NUMBER	PHONE	FAX
1				
2				

## CONGREGATIONAL INFORMATION

Size of Congregation	Size of Sanctuary	Seating Capacity	# of Services	Type of Service <input type="checkbox"/> Spoken Word <input type="checkbox"/> Cong. Singing <input type="checkbox"/> Organ <input type="checkbox"/> Praise Band <input type="checkbox"/> Choir		
Denomination	Choir Program/Members	Music Director	Name		Phone	Years
Music Description <input type="checkbox"/> Organ <input type="checkbox"/> Piano <input type="checkbox"/> Tape Accompaniment <input type="checkbox"/> Praise Band Ensemble <input type="checkbox"/> Vocal Solo-Quartet <input type="checkbox"/> Special Programs						
<input type="checkbox"/> Lead Guitar	<input type="checkbox"/> Rhythm Guitar	<input type="checkbox"/> Acoustic Guitar	<input type="checkbox"/> Bass Guitar	<input type="checkbox"/> Drum Kit	<input type="checkbox"/> Keyboards	<input type="checkbox"/> Other Instruments
<input type="checkbox"/> Amp <input type="checkbox"/> mic <input type="checkbox"/> mon	<input type="checkbox"/> Amp <input type="checkbox"/> mic <input type="checkbox"/> mon	<input type="checkbox"/> Amp <input type="checkbox"/> mic <input type="checkbox"/> mon	<input type="checkbox"/> Amp <input type="checkbox"/> mic <input type="checkbox"/> mon	<input type="checkbox"/> Amp <input type="checkbox"/> mic <input type="checkbox"/> mon	<input type="checkbox"/> Amp <input type="checkbox"/> mic <input type="checkbox"/> mon	<input type="checkbox"/> Amp <input type="checkbox"/> mic <input type="checkbox"/> mon

## EQUIPMENT TO BE LOCATED

Address	City	State	Zip
---------	------	-------	-----

THE UNDERSIGNED CERTIFIES THAT THE ABOVE INFORMATION, GIVEN FOR CREDIT PURPOSES, IS TRUE AND AUTHORIZES THE FIRM OR PERSON TO WHOM THIS APPLICATION IS MADE AND ANY CREDIT BUREAU OR OTHER INVESTIGATIVE AGENCY TO INVESTIGATE THE REFERENCES, STATEMENTS OR OTHER DATA LISTED OR ACCOMPANYING THIS APPLICATION. THE UNDERSIGNED AUTHORIZES ALL PARTIES CONTACTED TO RELEASE CREDIT AND FINANCIAL INFORMATION REQUESTED AS A PART OF SAID INVESTIGATION.

**X**

APPLICANT SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

**Please Fax This Application to 1-601-486-1866**