

Credit Application

BUSINESS INFORMATION								
LEGAL NAME OF BUSINESS:					BUSINESS CONTACT:			
STREET ADDRESS:		CITY:		STATE:	ZIP:		COUNTY:	
PHONE:		FAX:			EMAIL:			
DESCRIPTION OF BUSINESS:					WEBSITE:			
YEARS IN BUSINESS/DATE INCORPORATED: STATE INCORPORATEI			INCORPORATED:		FEDERAL TAX ID NUMBER:			
TYPE OF BUSINESS:				PUBLICLY HELD?	STOCK SYMBOL:			
Corporation Proprietorsh	LLC	🗌 Yes 🗌 No						
	RINCIPAL IN	FORMATION						
NAME:			OWNERSHIP %:	NAME:	AME: C			
HOME ADDRESS:				HOME ADDRESS:				
CITY:	STATE:	7	ZIP:	CITY:		STATE:	ZIP:	
	OTATE.	2		0111.		OTATE.	20.	
SOCIAL SECURITY NUMBER: PROVIDING A GUARANTEE?				SOCIAL SECURITY NUMBER: PROVIDING A GUARANTEE?				
SOCIAL SECORT F NOWBER.							GUARANTEE?	
	Yes	No No				Yes	No	
EQUIPMENT INFORMATION								
EQUIPMENT TYPE/MODEL:			VENDOR:					
				1				
LOCATION ADDRESS:		CITY:		STATE:	ZIP:		COUNTY:	
VENDOR SALES REPRESENTATIVE:				VENDOR CONTACT PHONE:				
EQUIPMENT PRICE (W/O TAX):				CONTRACT TERM:				
ACKNOWLEDGEMENT								
By signing below, the undersigned individual(s), who is either a principal of the credit applicant or a personal guarantor of its obligation, provides written instruction to xByte Capital or its designee (and any assignee or potential assignee thereof) authorizing your banks, trade references, and other financial institutions to release credit information								
to xByte Capital and review of your personal credit profile from a national credit bureau as required. Such authorization shall extend to obtaining a credit profile in considering								
this application subsequently for the purpose of update, renewal or extension of such credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in the application received.								
You also represent that the information you have provided is true and accurate.								
BUSINESS NAME:								
Signad:				Data		Titler		
Signed:				Date:		Title:		
Signed:				Date:	Title:			

Please email completed application to: apply@xbytecapital.com