



Precision Technologies, Inc.
 852 Co Rd 422 / PO Box 898 / Englewood, TN 37329
 Phone 423.887.5656 / Fax 423.887.5658 / info@precision-tec.com

CUSTOMER INFORMATION:

Legal Company Name: _____
 Address: _____ Contact Name: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____ Tax ID #: _____
 Website: _____ Email Address: _____

EQUIPMENT:

Description of Equipment: _____
 _____ Cost: \$ _____
 Equipment Location (if other than above): _____
 Nature of Business: _____

PATRIOT ACT: Federal law requires that all financial institutions obtain, verify and record information that identifies each person that opens an account to assist the Government fight against the funding of terrorism and money laundering activities. You must supply a copy of your drivers license and/or other identifying documents when signing a lease contract.

BANK / TRADE CREDIT INFORMATION:

Bank: _____ Checking Savings
 Account #: _____ Contact: _____
 Phone Number: _____ Fax Number: _____

To accelerate the application process, please send or fax the top (summary) pages of three (3) bank statements with this application.

Trade Reference: _____ Contact: _____
 Phone Number: _____ Fax Number: _____
Fill out one existing trade reference/lease reference, etc., here, or attach an existing reference sheet for your business.

PLEASE PROVIDE THE FOLLOWING INFORMATION ON PRINCIPALS OR COMPANY OWNER:

Principal #1: _____ Home Address: _____
 SS #: _____ City _____ State _____ Zip _____
 Home Phone: _____ Title: _____ % of Ownership: _____
Principal #2: _____ Home Address: _____
 SS #: _____ City _____ State _____ Zip _____
 Home Phone: _____ Title: _____ % of Ownership: _____

****If there are more owners, please place additional information on a second copy of this application.**
NOTE: On deals over \$50,000 please provide Balance Sheet and Income Statements for last two (2) fiscal years and any interim periods.

By signing below, the undersigned individual as principal of and/or guarantor for the applicant, authorizes Precision Technologies, Inc., its designee, assigns or potential assigns, to obtain further information concerning my credit standing from any references listed herein, or any other person or organization, and to review his/her personal credit profile provided by national credit bureaus in considering this Application and for the purpose of the update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. A fax or photocopy of this authorization shall be as valid as the original.

 PRINCIPAL #1 SIGNATURE PRINCIPAL #2 SIGNATURE DATE

 PRINT NAME PRINT NAME