

CREDIT APPLICATION

Business Information				
Business Name			Address	City/Sate/Zip
Corp	Partner	Sole Proprietor	Telephone	Fax # ()
Personal Information				
Guarantor			Social Security #	License #
Guarantor			Social Security #	License #
AUTHORIZATION : By submitting or signing the above information, you certify that the information provided in this credit application is accurate and complete. You authorize Highland Capital, its successors and/or assigns to obtain information from the references listed and obtain a consumer credit report that will be ongoing. The individual(s) signing or submitting this application further waive any right to claim which such individual would otherwise have under Fair Credit Reporting Act in the absence of this continuing consent.				
Signature			Date	

ECOA NOTICE (TO BE RETAINED BY APPLICANT): Your business credit application will be reviewed carefully and a decision will be rendered promptly. If your business credit application is denied, you have the right to a written Statement of the specific reasons for denial. To obtain a statement, please contact us within 60 days from the date that you are notified of our decision. We will send you a written statement of the reasons for denial within 30 days of your request. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, gender, marital status, age (provided applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program; or because the applicant has, in good faith, exercised any right under the Consumer Credit Protection Act. The federal agency that administers our compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.



Fax completed application to Mike Wary@877-927-4422

Phone: 877-727-4422 ext 11 mwary@highlandec.com