

PLEASE PRINT CLEARLY. Required items in bold italics. Personal information required if in business 5 years or less, or if 20 employees or less.

CUSTOMER AND BILLING INFORMATION

Company Legal Name: _____ Phone: (____) _____
Trade Style: _____ D&B #: _____ Fed. Tax ID #: _____
Billing Address: _____ City: _____ State: _____ Zip: _____
Equipment Address: _____ City: _____ State: _____ Zip: _____
Years in Business: _____ # of Employees: _____ Business Description: _____
Business Type: S-CORP NON-PROFIT PROPRIETOR PARTNERSHIP CORP GOVT.

PERSONAL INFORMATION OF PROPRIETOR, PARTNERS OR MAJOR SHAREHOLDERS

Parent Company Name: _____ City: _____ State: _____ Zip: _____
Principal Name: _____ Title: _____ SS #: _____
Home Address: _____ City: _____ State: _____ Zip: _____
Principal Name: _____ Title: _____ SS #: _____
Home Address: _____ City: _____ State: _____ Zip: _____

BANK / LEASE REFERENCES

Bank Name: _____ Contact: _____ Phone: _____
Checking Acct. #: _____ Loan Acct #: _____
Lease Company: _____ Phone: _____ Acct. #: _____

AUTHORIZATION FOR DISCLOSURE OF CREDIT INFORMATION (MUST BE SIGNED)

Applicant hereby authorizes the release of business and/or personal credit information to Gobin's Inc (I) from any source including credit bureau, reporting agencies and applicant's bank for the purpose of extending credit, (2) to any credit reporting agency. I hereby represent all information is true, correct and complete. A photostatic copy of this authorization shall be valid as the original.

Signature: _____ Title: _____ Date: _____
(AUTHORIZING OFFICER SIGNATURE)

(PLEASE PRINT NAME)

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the 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 compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

FOR VENDOR USE ONLY

Vendor: Gobin's, Inc.
Contact: Carol Lombard
Phone: (719) 586-1203
Sales Rep: _____

Terms _____
Factor _____
Payment _____

Advance Payments 0 1 2

Purchase Option:
 FMV \$1 10% CPC
Equipment Description: _____

Equipment \$ _____
Less Upgrade \$ _____
Total \$ _____

Comments: _____

MSRP: _____



615 N. Santa Fe
Pueblo, CO 81003
Voice 719-586-1203
Fax 719-586-1258