



iGage Credit Application

Submit Completed Apps To:
FAX - (800) 288-4959
Email - applications@firstwesternef.com

Customer's Business Information: (exact legal name required)

Legal Business Name:			Business Phone Number:
Business Address:	City:	State:	Zip Code:
Bill To Address: (Leave Blank If Same As Above)	City:	State:	Zip Code:
Ship to Address: (Leave Blank If Same As Above)	City:	State:	Zip Code:
Structure of Business: <input type="checkbox"/> Corporation (State of: _____) <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> LLC (State of: _____) <input type="checkbox"/> Government			Years in Business Under Current Ownership:
Contact Name:		Title/Position:	
Contact Phone Number:	Cell Phone/Alt. Phone:	Email Address:	
Nature of Business:	Fed. ID.#:	Fax Number:	

Customer's Personal Information: (exact legal name required)

1. Owner's Legal Name:	Home Address:	City:	
State:	Zip:	Social Security #	% Ownership:
2. Owner's Legal Name:	Home Address:	City:	
State:	Zip:	Social Security #	% Ownership:

Equipment:

Equipment Description (Please Attach Invoice if Available) :

Equipment Type (91 "A ck YFZHfUJYFZDck YF 9ei Jda YbzZYVW):

*If you are sales/use tax exempt, please include your tax exemption certificate with the signed credit application.

*Total equipment cost over \$100,000 requires last two years of business financial statements and current interim statement

Finance Program:

Program:	Term:	Advance Payment	Rate / Factor:	Equipment Cost:	Purchase Options: <input type="checkbox"/> \$1 Lease <input type="checkbox"/> EFA <input type="checkbox"/> 10% P.O.
----------	-------	-----------------	----------------	-----------------	--

Vendor Contact Information: (For Multiple Vendor Deals) Please Provide (All) Equipment Quotes With Signed Application

Vendor Business Name:		Web. Address:		Vendor Phone Number:	
Vendor Address:		City:	State:		Zip:
Sales Rep. Name:		Sales Rep. Phone Number:		Sales Rep. E-mail Address or FAX:	

Financing Administered by First Western Equipment Finance:



**First Western
Equipment Finance**
Financing Made Simple.

Jay Hagen
Business Dev. Manager
First Western Equipment Finance
Tel: (866) 603-9247
jay.hagen@firstwesternef.com

Vicki Jenniges
Account Manager
First Western Equipment Finance
Tel: (888) 705-0586
vicki.jenniges@firstwesternef.com

Authorization & Owner(s) Signature(s):

I (we) authorize First Western Equipment Finance to review my credit to qualify for the financing requested in this application against any credit reporting bureau/agency; review any and all information or references disclosed in this application; information will remain confidential and will not be disclosed to any third party outside of credit reporting agencies. I (we) certify that the above information is complete and correct and the equipment is being acquired for commercial and not consumer use.

Signed By: X _____ Date: _____

Signed By: X _____ Date: _____