



DRIVE SALES WITH
0 DOWN
90-DAY
 DEFERRED
 FINANCING SPECIAL!

Increase sales while helping your customers
 get the equipment they need NOW

No payments until 2016!

	\$1,000 - \$9,999 RATE	\$10,000 - \$49,999 RATE	\$50,000 - \$99,999 RATE
12 month term	.098204	.094563	.093912
24 month term	.051177	.048577	.048435
36 month term	.035167	.033362	.0332264
48 month term	.02765	.025856	.025721
60 month term	.023119	.021181	.021047

TERMS & CONDITIONS:

- No payments for 90 days, \$0 down
- Three years plus in business
- \$79 documentation fee due with documents
- \$1 purchase option
- Call for transactions of \$100,000 plus
- Standard credit application procedures
- Hardware, software, installation, training
- Maintenance may not be Included beyond one year
- New equipment only
- For commercial entities only, subject to credit approval

DOCUMENTATION:

- Standard Advantage Financial Services documentation
- Invoice:
 Lease: **Sold to:** AFS, LLC **Ship to:** Customer
 EFA: **Sold to:** Customer **Ship to:** Customer
- Insurance required
- All original documents and verbal confirmation required for funding.

Advantage Financial Services
Peter Davison

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*Offer subject to change at any time by AFS, LLC.
 Transactions must be approved October 1, 2015 - December 31, 2015
 and funded by January 31, 2016.*



CONFIDENTIAL CREDIT APPLICATION

CUSTOMER: You, the credit applicant, certify to us that you are applying for credit for a business purpose, and not for personal, family or household use.

Legal Name: _____ **Telephone:** _____
Street: _____ **Fax #:** _____
City: _____ **Contact:** _____
State: _____ **Zip:** _____ **e-mail:** _____

BUSINESS STRUCTURE: Corp. Proprietorship Partnership Non-Profit LLC

Net Income _____ Yrs in Bus: _____ Yrs Mgt: _____ Gross Sales: _____ Fed ID#: _____

BUSINESS PRINCIPALS:

Name and Home Address:	Social Security #	% Ownership
Net Worth	Income	Phone #
Name and Home Address:	Social Security #	% Ownership
Net Worth	Income	Phone #
Name and Home Address:	Social Security #	% Ownership
Net Worth	Income	Phone #

CREDIT REFERENCES:

Name	Account # (if appl.)	Contact	Phone Number
(Bank)			
(Trade)			
(Trade)			

EQUIPMENT INFORMATION:

Manufacturer	Model	Qty	Cost

(Attach list of equipment) Shipping/Other: _____
 Expected Delivery Date: _____ Total _____

Supplier _____ Contact _____ Tel# _____ Fax# _____

AGREEMENT STRUCTURE requested:

Term: 12 mos. 24 mos. 36 mos. 48 mos. 60 mos. Other

Purchase Option: \$1.00 FMV Other _____ Specify

Dealer: _____ Sales Rep: _____ Phone # _____

*I authorize you and your assigns an/or third party underwriters to obtain or exchange such information as you may require in connection with this application and agree that the application shall remain in your property whether or not the credit is granted. I affirm that each of the answers given is true and correct and is made for the purposes of obtaining credit. You are entitled to rely thereon whether or not you obtain further information. I agree to notify you of any material change in the facts stated in these answers including change of business or home address until the amount of any loan from you has been fully satisfied.

*I understand that a consumer report may be requested by you in connection with this application for credit and for any update, renewal or subsequent extension of credit which I may apply for here after. I further understand that should I ask, you will inform me whether or not you have a consumer report, and I will be informed of the name and address of the consumer reporting agency that furnished the report.

*Notice: If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact the Lessor herein within 60 days for the date you are notified of our decision.

Applicant's Signature: _____ Date: _____