

Funeral Cars • Limousines • Service
Serving you since 1969

850 WILLIAMS DRIVE
MARIETTA, GEORGIA 30066
678.784.2121 • 800.334.2697

COMPANY INFORMATION

Legal Business Name: _____	Federal Tax I.D.# _____
d/b/a _____	# of Funerals Annually: _____ # of employees: _____
Entity Type: <input type="checkbox"/> Corp. <input type="checkbox"/> L.L.C. <input type="checkbox"/> Sole Prop <input type="checkbox"/> Partnership	Real Estate: <input type="checkbox"/> Owned <input type="checkbox"/> Rented
Street Address: _____	Monthly Payment _____
City: _____ State: _____ County: _____	Zip Code: _____
Phone #: _____	Fax #: _____ Years in Bus.: _____

PERSONAL GUARANTOR(S) / PRINCIPLE(S)

Name: _____	Home Phone #: _____
Title: _____ % Ownership: _____	Cell#: _____
Residence: _____	
City: _____ State: _____	Zip: _____
SSN: _____	Birth date: _____
Name: _____	Home Phone #: _____
Title: _____ % Ownership: _____	Cell#: _____
Residence: _____	
City: _____ State: _____	Zip: _____
SSN: _____	Birth date: _____

BANK REFERENCES

Bank Name: _____	Phone #: _____
Address: _____	Contact: _____
City: _____ State: _____	Zip: _____

I make this application to Shields Southeast Sales, Inc. who may contact a finance company (FC) for a lease finance line of credit and give the above information to the FC in order to obtain this credit. I authorize the FC to obtain information concerning any statements made herein and understand that a credit report may be requested in connection with this application and any subsequent update, renewal, or extension of credit. If I request, I will be informed if a credit report was requested and the name and address of the agency that furnished the report.

To the absolute best of my knowledge, the information I have provided is true.

Applicant's Signature: _____	Date: _____	FAX COMPLETED APPLICATION TO (678) 784-2110 Or email: SHILL@myhearse.com
Printed Name: _____		