## Equipment Financing / Credit Authorization

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E-MAIL:	
APPLICANT:	
ADDRESS:	
CITY, STATE,	
ZIP: PHONE:	
SS#:	
BIRTH DATE:	
PRINCIPAL OF THE OBLIGATION, PROVASSIGNEE OR POTE PERSONAL CREDIT AUTHORIZATION SEPURPOSES OF UPDE CREDIT FOR REVIEW PHOTOSTAT OR FACTORIZATION.	W, THE UNDERSIGNED INDIVIDUAL, WHO IS EITHER A E CREDIT APPLICANT OR A PERSONAL GUARANTOR OF ITS VIDES WRITTEN INSTRUCTION TO:OR ITS DESIGNEE (AND ANY ENTIAL ASSIGNEE THEREOF) AUTHORIZING REVIEW OF HIS/HER PROFILE FROM A NATIONAL CREDIT BUREAU. SUCH HALL EXTEND TO APPLICATION AND SUBSEQUENTLY FOR ATE, RENEWAL OR EXTENSION OF SUCH CREDIT OR ADDITIONAL EWING OR COLLECTING THE RESULTING ACCOUNT. A CSIMILE COPY OF THIS AUTHORIZATION SHALL BE VALID AS BY SIGNING BELOW, I/WE AFFIRM MY/OUR IDENTITY AS THE VIDUAL/S IDENTIFIED IN THE ATTACHED APPLICATION.
SIGNATURE	
DATE	