



INTELLIGENT VIDEO DRIVING PROFIT

Finance Application

Page 1 of 2 (United States Only) rev. 8.2026

This application should be completed by all principal investors for new projects, any equipment replacement projects and business acquisitions

Equipment Manufacturer, Distributor or Reseller

Name of Manufacturer, Distributor or Reseller: _____ Sales Representative: _____

Business Entity Information

Exact Legal Company Name: _____ DBA: _____

Street Address: _____

City: _____ State: _____ Zip: _____ County: _____

Business Contact: _____ E-Mail: _____

Business Phone Number: _____ FAX: _____

Business Structure

Check Which One Applies: Corporation ☐ LLC ☐ Partnership ☐ Proprietor ☐

Federal Tax I.D. Number: _____ D&B Number (if known): _____

Date Incorporated: _____ State of Incorporation: _____ Current Ownership Control Since: _____

Equipment Location Information

Equipment Location Address: _____

City: _____ State: _____ Zip: _____ County: _____

Check Which One Applies: Own Building ☐ Rent Building ☐ Monthly Payment: _____

Mortgage Holder or Landlord of Business Location: _____

Mortgage Holder or Landlord Address: _____ Phone Number: _____

City: _____ State: _____ Zip: _____

Personal Information

Principal #1 Name: _____ Social Security Number: _____

Title: _____ Address: _____

City: _____ State: _____ Zip: _____ County: _____

Date of Birth: _____ Mobile Phone: _____ Percent of Business Owned: _____

E-Mail: _____ US Citizen: Yes ☐ No ☐



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Personal Information (Continued)

Principal #2 Name: _____ Social Security Number: _____

Title: _____ Address: _____

City: _____ State: _____ Zip: _____ County: _____

Date of Birth: _____ Mobile Phone: _____ Percent of Business Owned: _____

E-Mail: _____ US Citizen: Yes ☐ No ☐

Banking Information

Primary Bank: _____

Account Contact: _____ Email: _____

Insurance Information

Agency Name: _____

Agency Contact: _____ Email: _____

Finance or Lease Term Requested

☐ 12 Months ☐ 24 Months ☐ 36 Months ☐ 48 Months ☐ 60 Months ☐ 72 Months ☐ 84 Months ☐ 96 Months+

Check Which One Applies: ☐ \$1-Out Lease ☐ EFA (Equipment Finance Agreement) Desired Financed Amount: _____

By submitting this Application, the undersigned warrants that the applicant and each individual listed as a principal, partner, owner, guarantor or obligor consent, authorize and warrant as follows: (a) United States Capital Corporation and or its assigns ("USCC") may obtain commercial and consumer credit reports, investigate references and statements, and make other credit inquiries about the applicant and all such individuals, and anybody contacted in connection therewith may release any credit and financial information; (b) USCC and or its assigns may share with one another financial, credit and other information about the applicant and such individuals and use shared information to market to the applicant and the individuals; (c) the information on or accompanying this Application is true and complete, and the undersigned will notify USCC of any material change in any information; (d) this Application is submitted in connection with financing solely for business and commercial purposes and NOT for personal, family or household purposes; (e) the applicant, if an individual, is a citizen or lawful permanent resident of the United States; and (f) this Application will apply to any future request for additional financing and all notices, disclosures, consents and warranties shall be deemed repeated for each future request, unless the applicant submits a new written application. USCC does not make offers or commitments to extend credit except in final signed documents and, in limited circumstances, in and pursuant to the terms and conditions of written commitment letters. Term sheets, proposal letters, approval letters and the like are not commitment letters.

READ CAREFULLY BEFORE SUBMITTING THIS APPLICATION: We recommend that you print the Application, sign it below and fax or mail it to us at the address set forth below. If you send this Application by unencrypted and non-secure e-mail, the contents including non-public information may be at risk, and we are not responsible for the security of the contents or for any theft or loss of data during e-mail transmission. If you decide to assume the risk of submitting this Application by e-mail, enter your name as authorized agent below. By entering your name and submitting this Application to us, you agree that this Application is an electronic record executed by you using your electronic signature.

Principal #1 Signature/Title: _____ Date: _____

Principal #2 Signature/Title: _____ Date: _____