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Application

Business Information *(denotes required field)

▶

Company Name*		d/b/a		
Address*	City*	State*	County*	Zip*
Phone*	Fax	Date Business Established*		
Equipment Location Address		Federal I.D. #		
Business Structure: <input type="radio"/> Corporation <input type="radio"/> Partnership <input type="radio"/> Proprietorship <input type="radio"/> LLC				
Approximate Annual Sales:	\$ <input type="text"/>	Approximate Net Worth:	\$ <input type="text"/>	

Personal Information

▶

Primary Owner*		Title		
Home Address*	City*	State*	Zip*	
Main Phone*	Mobile Phone	E-mail Address*		
Primary Owner SS#	% of ownership			
Additional Owner		Title		
Home Address	City	State	Zip	
Main Phone	Mobile Phone	E-mail Address		
Additional Owner SS#	% of ownership			

Vendor Information (Who you are purchasing the equipment from)

▶

Vendor	Contact	Phone
Equipment Description		
Equipment Cost:	\$ <input type="text"/>	

I authorize AXIS Capital, Inc., its heirs & assigns to obtain a personal report on all principals & guarantors for credit purposes, & (2) authorizes the release to AXIS Capital, Inc. of all credit information it may request, including business & personal banking, mortgage, landlord, trade & lease information.

Signature	Title	Date	Axis Sales Rep
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