

**Fax completed application to: 866.487.1415**

DATE:

**Business information:** Please check appropriate box:  Corporation  Limited Liability Company  Partnership  Proprietorship

Legal name (applicant): \_\_\_\_\_ DBA: \_\_\_\_\_

Street address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_ Business telephone: \_\_\_\_\_

Business fax: \_\_\_\_\_ E-mail address: \_\_\_\_\_ Web site address: \_\_\_\_\_

Practice specialty: \_\_\_\_\_ Years in business: \_\_\_\_\_ Organized in state of: \_\_\_\_\_ Federal tax I.D. #: \_\_\_\_\_

**Guarantor information:** List additional individual(s) with signature on separate credit application.

EACH OF THE UNDERSIGNED HEREBY AUTHORIZES CITICAPITAL OR ANY OF ITS AFFILIATES OR DESIGNEES TO INVESTIGATE THE INFORMATION CONTAINED HEREIN OR STATEMENTS OR OTHER DATA OBTAINED FROM ME OR FROM ANY OTHER PERSON PERTAINING TO THE CREDIT APPLICANT AND/OR MY PERSONAL CREDIT HISTORY, AND TO OBTAIN CREDIT REPORTS ON THE UNDERSIGNED AS MAY BE NEEDED IN CONNECTION WITH THIS CREDIT APPLICATION AND ANY SUBSEQUENT REVIEW PROCESS. FURTHER, EACH OF THE UNDERSIGNED AUTHORIZES CITICAPITAL AND THE SELLER, DISTRIBUTOR, DEALER, LICENSOR OR MANUFACTURER TO DISCLOSE TO EACH OTHER INFORMATION ABOUT APPLICANT'S ACCOUNTS, CREDIT AVAILABILITY AND CREDIT EXPERIENCE.

Principal / Guarantor #1: Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
**X**

Specialty: \_\_\_\_\_ Years licensed: \_\_\_\_\_ % of ownership: \_\_\_\_\_ Social security #: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Principal / Guarantor #2: Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
**X**

Specialty: \_\_\_\_\_ Years licensed: \_\_\_\_\_ % of ownership: \_\_\_\_\_ Social security #: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Transaction information:**

Description of Items to finance:

**VersaWave Trade-In for Waterlase**

Equipment / software cost:	\$ <b>45,950.00</b>	Term, Months (Check One): <input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> 72 <input type="checkbox"/> 84 <input type="checkbox"/> OTHER:
Construction / other costs:	\$	Advance Payments (Check One): <input type="checkbox"/> First & Last <input type="checkbox"/> First <input type="checkbox"/> Zero <input type="checkbox"/> OTHER:   Payment Factor:   Payment Amount:
Working capital:	\$	Purchase Option (Check One): <input type="checkbox"/> Fair Market Value (FMV) <input type="checkbox"/> 10% Option <input type="checkbox"/> 10% PUT <input type="checkbox"/> \$1.00 <input type="checkbox"/> OTHER:
<b>TOTAL AMOUNT REQUESTED:</b>	\$ <b>45,950.00</b>	NON-Standard or OTHER Lease Terms (Including Deferrals):

Originator company name: **Hoya ConBio** | Originator sales rep: **Nick Clausen**

Originator sales rep phone: **800-532-1064** | Originator sales rep e-mail address: \_\_\_\_\_

**Preferred contact:**  Applicant  Originator Sales Rep Best Phone #: \_\_\_\_\_

**CitiCapital Credit Application Team Fax: 866.487.1415 Phone: 914.899.7474**

<b>CitiCapital Use Only:</b>			
OPlan: <b>Hoya ConBio [RSS]</b> 20070701 Premier	Regional Manager: <b>Randy Lawson</b>	Account Executive: <b>Sally Finn</b>	Origination Code: <b>400.00 - 01000.00</b>