



Prestige Dental Products

Financing Options:

Equipment Finance Agreement

A simple loan. Make your payments and at the end of your term you are done.

Operating Lease - True Lease

Fair Market Value Lease, allows you to write off each payment as an operating expense.

One Minute Credit Application

Renee Tuttobene – Account Executive

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Fax 949-916-3901

Direct 949-525-4595

Name of Business			Business Phone Number		
Business Street Address			Cell Phone Number		
City	State	Zip	Email		
Date Business Established			Authorized Signer		Title
Tax I.D. No.			Type of Business		
			<input type="checkbox"/> Sol Prop <input type="checkbox"/> LLC <input type="checkbox"/> Corp		
Name of Owner			Social Security Number		
Home Street Address			Percentage of Ownership		
City	State	Zip	Tax I.D. No.		
Vendor			Finance Amount		
Phone Number			Term Requested		

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes Partners Capital Group to obtain from third parties, information it deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes Partners Capital Group, its designee, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this Application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. I authorize all deposit, borrowing, financial and trade information to be released by telephone or fax. A photocopy or fax of this authorization shall be valid as the original. To help fight terrorism and money laundering, Federal Law requires banks to verify the information you provide, which may include driver's license or other documents, to identify you.

Name	Signature	Title	Date
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