



**EQUIPMENT FIRST**

**QUESTIONS FOR START-UP OR LIMITED TIME IN BUSINESS ENTITIES**

The following questions are intended to help us better understand your company’s background, growth stage, and the purpose of your financing request. This information is used solely for internal review and to provide insight to our funding partners. Completing this questionnaire does not constitute a financing application, contract, or guarantee of approval. All funding decisions are made independently by the lending institutions.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Owner(s): \_\_\_\_\_

1. What is the nature of the business you are starting or have started?  
\_\_\_\_\_
2. What is your experience in this industry?  
\_\_\_\_\_
3. What kind of management experience do you have?  
\_\_\_\_\_
4. What made you start the business?  
\_\_\_\_\_
5. How will you market your product/service?  
\_\_\_\_\_
6. What is your competition and what sets you apart?  
\_\_\_\_\_
7. What will this purchase help you do?  
\_\_\_\_\_
8. What other equipment have you purchased for the startup of this business?  
\_\_\_\_\_
  - a. How did you pay for this equipment?  
\_\_\_\_\_
  - b. If financed:
    - i. With whom? \_\_\_\_\_
    - ii. What are the monthly payments? \_\_\_\_\_
    - iii. What is the approximate balance? \_\_\_\_\_
9. What other equipment do you plan to purchase to coincide w/ the startup of this business?  
\_\_\_\_\_
10. How do you plan to pay for this equipment?  
\_\_\_\_\_
11. Current facility for your business?  
\_\_\_\_\_

Additional Comments/Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IF ADDITIONAL SPACE IS NEEDED, PLEASE PROVIDE ANSWERS ON A SEPARATE SHEET**