



Infinity Credit Authorization

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Infinity Bol, LLC

Manufacturing & Warehouse
 3700 Dundee Rd
 Winter Haven, FL 33838
 sales@minilane.com

PURCHASER (exact legal name required)

Business Name	
Business Address	
Business City/State/Zip	
Cell Telephone Number	Fax Number
Primary Contact Person	E-mail Address

SOCIAL SECURITY (All Principles)

Name	Social Security Number
Name	Social Security Number
Name	Social Security Number
Name	Social Security Number

Equipment Location (if other than above)		State of Incorporation
Nature of Business	Time in Business _____ Years _____ Months	Federal Tax Id #
Type of Business: <input type="checkbox"/> Corp / LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Non-Profit <input type="checkbox"/> Individual <input type="checkbox"/> Other		

Credit Form Terms and Conditions

Forwarding this credit application, I / we hereby authorize Infinity Bol, LLC, or its assignee(s) to review my personal and business credit profile for the purposes of obtaining credit. In addition, I / We authorize and instruct any person, consumer reporting agency, or bank institution to compile and furnish Infinity or its assignee(s) with any information it may have in response to an inquiry from a lessor or creditor. I / We certify that the information provided in this application is true and correct and understand a facsimile, electronic, or other copy of this document shall be valid as the original.

Authorization: _____ Date: _____

Authorization: _____ Date: _____

