

Financing Application

*only commercial / business financing is available at this time



Apply By Phone

To apply by phone, please call Melissa Bayliff at (800) 229-9813 x341



Apply By Fax

To apply by fax, please complete this application and fax to: (513) 979-5279

COMPANY INFORMATION				PRINCIPAL OWNER'S INFORMATION		
COMPANY NAME:				PRINCIPAL NAME:		
CONTACT TITLE:				HOME ADDRESS:		
ADDRESS:						
CITY:		STATE:	ZIP:	CITY:	STATE:	ZIP:
BUSINESS PHONE:				SOCIAL SECURITY #:	BIRTH DATE:	
CELL PHONE:				PHONE#:	% OWNERSHIF	P:
FAX#:				EMAIL:		
FEDERAL TAX ID:			SIGNATURE:	DATE:		
COMPANY TYPE / INDUSTRY:						
TIME IN BUSINESS:	ME IN BUSINESS: # OF EMPLOYESS:			PRINCIPAL II NAME:		
TIME IN BUSINESS UNDER CURRENT OWNERSHIP:				HOME ADDRESS:		
BUSINESS TYPE:						
PARTNERSHIP LLC	S-CORP CORPORATION	SOLE PROP NON PROFIT	MUNICIPAL	CITY:	STATE:	ZIP:
				SOCIAL SECURITY #:	BIRTH DATE:	
DO YOU RENT OR OWN YOUR BUSINESS LOCATION:				PHONE#:	% OWNERSHI	P:
IF RENT, LANDLORD NAME:				EMAIL:		
LANDLORD PHONE:				SIGNATURE:	DATE:	
				EQUIPMENT INFORMATION		
BANK & TRADE REFERENCES				EQUIPMENT INFORMATION		
BANK REFERENCE NAME:				EQUIPMENT TYPE:		
BANK ACCT NUMBER:				ESTIMATED COST:		
BANK PHONE:				TIME FRAME TO PURCHASE:		
BANK CONTACT:				VENDOR:		
TRADE REFERENCE NAME:						
TRADE REFERENCE ACCT NUMBER:						
TRADE REFERENCE PHONE:						
TRADE REFERENCE CONTACT:						

Delivery of this application bearing a facsimile signature(s) shall have the same force and effect as if the application bore and inked original signature(s). The application certifies that all information provided is true, correct and complete and that the account will be used soley for business and commercial purposes. The applicant, owner(s) and guarantor (if any) authorize Wine Cellar Innovations or its designee(s) or assignee(s) to obtain any information it may request from any business or consumer reporting agency(ies) or other sources that provide credit reports, account history information, credit and employment history or similar information; such authorization shall extend to update renewal or credit and for reviewing or collecting the account. The applicant acknowledges that, based upon such information and other factors which may apply, Wine Cellar Innovations or its assignee(s) or designee(s), in their sole discretion, may either grant or decline to grant credit. By signing above, I also wish to continue to receive updates from Wine Cellar Innovations and its partners regarding this account. Information should be sent to the fax and/or email address provided for the account.