

NEW EQUIPMENT AT JUST:

\$99
/mo.
FOR 6 MONTHS!*



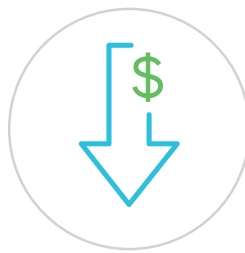
Purchase with peace of mind.

With the cost of goods and cost of financing still on the rise, it's a smart time to lock in today's pricing, rates, and payments for your next purchase. It's also more important than ever to make sure you have cash on hand for unforeseen expenses. We're here to tell you that it's possible to both keep your savings intact AND invest in your business. With **\$99 payments for the first 6 months** of your term, the new equipment purchase you need to make is not only feasible, but allows you the peace of mind that should something come up, you're not going to be left cash-strapped.



FIXED RATES

+



LOW PAYMENTS

=



CASH IN POCKET

*Offer subject to credit and equipment approval and 2+ years in business. Valid on new transactions through 3/31/23 only. \$99/month for your first 6 months with regular payments beginning on month 7 of your lease term.



3 easy ways to apply:

scan the QR code,
visit aldertech.gogc.com
or complete form on page 2

use promo code: **99FOR6**



with financing powered by:
Geneva Capital LLC



Damon Cincotta, Sales Manager
(320) 759-3588 | damon@gogc.com

Jessica Srock, Sales Manager
(320) 759-3513 | jessica@gogc.com

COMPLETE OUR ONLINE FORM:

FINANCING QUESTIONS?

APPLY NOW!
aldertech.gogc.com

OR

FAX THIS FORM TO: **320.762.8402**
or CLICK THE "SUBMIT" BUTTON BELOW

Damon Cincotta
(320) 759-3588
damon@gogc.com

Jessica Srock
(320) 759-3513
jessica@gogc.com

Equipment Cost \$	Equipment Description	Promo Code (optional)
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Business Information


Legal Company Name (include dba name if applicable)		Date Established (Current Ownership)	Type of Business (Circle one): Sole Prop. Partnership Corporation LLC Other	
Company Primary/Mailing Address		City	State	Zip
Physical Location of Equipment - if different than above (No PO Boxes)		City	State	Zip
Federal Tax ID #/ EIN (9-digits)	State Tax ID #/ Resale Permit #	Business Phone #		Preferred Contact Method (Circle one): Office # Mobile # E-mail
Primary Contact Name		Office #	Mobile #	E-mail Address
Own Business Location (Y/N)	Landlord Name		Landlord Telephone #	

* If solely owned, spousal information **is required** on credit application. If business is closely held, credit is determined based upon jointly held assets.

Personal Information

	Applicant 1	Applicant 2	Applicant 3
Name (First, M, Last)			
Home Street Address (No PO Boxes)	<input type="checkbox"/> Own <input type="checkbox"/> Rent	<input type="checkbox"/> Own <input type="checkbox"/> Rent	<input type="checkbox"/> Own <input type="checkbox"/> Rent
City, State, Zip			
Social Security #			
Date of Birth			
Mobile #			
Home Phone #			
E-mail Address			
% of Business Ownership			
Are you a US Citizen? (Y/N)			
If no, please list green card expiration date			

X _____ Applicant Signature	X _____ Applicant Signature	X _____ Applicant Signature
_____ Date	_____ Date	_____ Date

 Please submit a copy of your prior **3 months bank statements** with this application.
* You may submit bank statements separately if not readily available at the time of application. However, credit decision may be pending until received.