



LSQ Funding Group, LC on behalf of  
Trearce Brands Inc. DBA EKO  
1405 W Colonial Dr  
Orlando, FL 32804

Credit Application

LSQ Client Name: Trearce Brands Inc. DBA EKO

Legal Name of Business: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fed-ID# or SS#: \_\_\_\_\_

\_\_\_\_\_ Corporation \_\_\_\_\_ Proprietorship \_\_\_\_\_ Partnership

How long in business? \_\_\_\_\_ If new business, what was the starting capital? \_\_\_\_\_

D&B# \_\_\_\_\_ Source: \_\_\_\_\_ Personal \_\_\_\_\_ Borrowed

Company Officers: \_\_\_\_\_ Title: \_\_\_\_\_

Or Partners: \_\_\_\_\_ Title: \_\_\_\_\_

Name of person to contact for further credit information: \_\_\_\_\_

Name of accounts payable contact: \_\_\_\_\_

Bank Information

Name of Bank: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ Fax \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account #: \_\_\_\_\_ Account Officer: \_\_\_\_\_

Contd...

**Trade References**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account #: \_\_\_\_\_

Account Officer or Contact: \_\_\_\_\_

.....

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account #: \_\_\_\_\_

Account Officer or Contact: \_\_\_\_\_

.....

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account #: \_\_\_\_\_

Account Officer or Contact: \_\_\_\_\_

I authorize LSQ Funding Group to obtain credit information now and in the future in order to maintain an open account.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

Please return via email to [brandi@ekocontract.com](mailto:brandi@ekocontract.com) Attn: New Credit Application

Thank You.