

# Lease Application

## Credit Processing

Phone: (888) 812-9534

Fax: (888) 812-2645

<b>LESSEE (exact legal name required)</b>	
Name _____	
Address _____	
City/State/Zip _____	
Telephone Number _____	Fax Number _____
Contact Person _____	E-mail Address _____

<b>SUPPLIER</b>	
Name _____	
Address _____	
City/State/Zip _____	
Telephone Number _____	Fax Number _____
Salesperson _____	

<b>EQUIPMENT DESCRIPTION:</b>		
<input type="checkbox"/> New <input type="checkbox"/> Used		
Equipment Location (if other than above) _____		State of Incorporation _____
Nature of Business _____	Time in Business _____ Years      _____ Months	Federal Tax Id # _____
<b>Type of Business:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government <input type="checkbox"/> Other		
Lease Term _____		Purchase Option <input type="checkbox"/> FMV <input type="checkbox"/> 10% <input type="checkbox"/> \$1.00
<b>Security Deposit(s)</b> <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <b>OR</b> <b>Advance Payment(s)</b> <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2		
<b>Monthly Payment \$</b> _____ <b>Plus Tax \$</b> _____ <b>Total Payment \$</b> _____		

<b>BANKS</b>			
Bank Name		Bank Name	
1. _____		2. _____	
Type of Account _____	Account Number _____	Type of Account _____	Account Number _____
Contact Officer _____	Telephone Number _____	Contact Officer _____	Telephone Number _____

<b>TRADES</b>			
Name		Name	
1. _____		3. _____	
Telephone Number _____		Telephone Number _____	
Name		Name	
2. _____		4. _____	
Telephone Number _____		Telephone Number _____	

If closely-held corporation, partnership or proprietorship or less than 50 employees or in business less than five years, please provide the following on principals			
Name _____	Home Address _____	City/State/Zip _____	Social Security Number _____
Name _____	Home Address _____	City/State/Zip _____	Social Security Number _____

<b>SIGNATURE / RELEASE</b>	
It is expressly understood that this constitutes an application only and in itself shall not be binding upon either party. Additionally, I / we authorized Leasing company (and its designee or assignee) to investigate the banks, savings and loan and trade references listed, and if required, to perform personal credit investigations on the corporate principals, partners or proprietor listed above.	
Authorization: _____	Date: _____
Authorization: _____	Date: _____