

### LESSEE INFORMATION

Legally Registered Name		Trade or DBA Name	Primary Contact		
Street Address		City, State, Zip	Phone & Ext. E-mail		
Type of Business <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> C-Corporation <input type="checkbox"/> LLC <input type="checkbox"/> S-Corporation <input type="checkbox"/> Other _____		Nature of Business	Federal Tax ID		
		Parent Company Name/State of Organization	Address		
Years in Business yr(s)	State of Organization	Gross Annual Sales	Website		

### LESSEE BORROWING/BANKING INFORMATION

Bank Name	Account Number	Contact	Phone	Ext.	Fax Number
Bank Name	Account Number	Contact	Phone	Ext.	Fax Number
Trade Supplier	Account Number	Contact	Phone	Ext.	Fax Number

### PRINCIPAL INFORMATION (If more than two, copy form and complete for each)

Principal First Name	Last Name	Will Principal Guarantee? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Street Address	City, State, Zip	% Ownership	Owner Since	SS#	
Principal First Name	Last Name	Will Principal Guarantee? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Street Address	City, State, Zip	% Ownership	Owner Since	SS#	

### VENDOR INFORMATION

Vendor Name	Address	City, State, Zip			
Vendor Sales Rep	Phone Number	Fax Number	E-mail Address		

### EQUIPMENT INFORMATION

Equipment Description	Equipment Cost	<input type="checkbox"/> New <input type="checkbox"/> Used	Location of Equipment (if different from Business Address)	Total Equipment Cost \$	Amount of Each Payment \$
_____	_____				
_____	_____				
_____	_____				
_____	_____				
Total Cost	\$ _____				
		Year of Equip. (if used) _____	Leasing Plan <input type="checkbox"/> FMV <input type="checkbox"/> \$100 buyout <input type="checkbox"/> Other		Advance Payment (s) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Other
		Lease Term <input type="checkbox"/> 24, <input type="checkbox"/> 36, <input type="checkbox"/> 48, <input type="checkbox"/> 60 months		Expected Delivery Date	Security Deposit \$

The undersigned acknowledge and understand that our company is relying on this information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents warrants and certifies that the information provided herein is true, correct and complete and agrees to notify our company immediately of any changes to this information. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Office of the Comptroller of the Currency, Customer Assistance Group, 1301 McKinney Street, Suite 3710, Houston, Texas 77010.

#### Authorization for Disclosure of Business and Personal Credit Information

Applicant hereby authorizes the release of business and personal credit information to our company, or its designee (and any assignee or potential assignee thereof) from any source including credit bureau reporting agencies and applicant's bank and trade references. By signing below, the undersigned individual who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to our company, or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. The undersigned hereby represents that all of the information contained in this credit application is true, correct and complete.

Signature \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_  
(Please Print Name)