



Date: \_\_\_\_\_

**BUSINESS LEASE APPLICATION**

<b>Name of Company</b>		Tax ID#
<b>Address</b> (Street, City, State, ZIP)		<b>Phone Number</b>
<b>Equipment Location</b> (Street, City, State, ZIP)	County	Fax Number
<b>Authorized Officer</b> Handling this Lease	<b>Title</b>	<b>Cell Phone Number</b>
		<b>Email Address</b>
Type of Business Product	<b>Year Started</b>	<b>Date of Proprietorship</b> <input type="checkbox"/>
		<b>Date of Partnership/LLP</b> <input type="checkbox"/>
		<b>Date of Incorp./LLC</b> <input type="checkbox"/>
		<b>State</b>

**SUPPLIER AND EQUIPMENT DESCRIPTION (Attach an invoice or quotation if available)**

Supplier:	Equipment Cost	Lease Rate Factor
Phone:	Installation/Freight	Mo. Payment
Contact:	Total Cost	Lease Term (mo.)
Equipment Description:		

**BANK REFERENCES**

Bank Name and Address (1)	Bank Name and Address (2)
Officers Name & Phone	Officers Name & Phone
Checking Account Number	Checking Account Number

**TRADE REFERENCES**

Landlord / Mortgage Holder Name and Address	Contact and Phone Number
Supplier (1) Contact & Phone	Supplier (3) Contact & Phone
Supplier (2) Contact & Phone	Supplier (4) Contact & Phone

**COMPANY'S LEASING REFERENCES (EQUIPMENT / AUTO / OTHER)**

Name (1)	Address, City, State and ZIP	Phone
Name (2)	Address, City, State and ZIP	Phone

**INSURANCE INFORMATION - (Lessee is required to provide insurance for the lease)**

Insurance Company or Broker	Name of Insured
Agent	Phone
	Address, City, State and ZIP

Has the Applicant or any Guarantor ever had	Explain
<input type="checkbox"/> Repossession <input type="checkbox"/> Bankruptcy <input type="checkbox"/> Judgement <input type="checkbox"/> None	

Applicants Statement: Company has answered the questions in this application fully and truthfully. Company understands that Lessor may check Company's credit record and any statements Company has made. Company gives all of its creditors permission to give Lessor any information Lessor needs to determine whether Lessor wants to grant Company credit. Company gives Lessor permission to give credit reporting agencies and other creditors information relating to any credit Lessor might grant Company.

**AUTHORIZED SIGNATURE TITLE DATE**

<b>President / Owner / Partner</b>	<b>Social Security No.</b>	<b>Home Address, City, State and ZIP</b>	<b>Phone</b>
Vice President / Owner / Partner			
Secretary / Owner / Partner			

"The undersigned consents to and authorizes Lessor from time to time to obtain and use a consumer credit report on the undersigned. Lessor will use the report to evaluate the creditworthiness of the undersigned as principal(s), Proprietor(s), and/or guarantor(s) as contemplated by this credit application consistent with the law"

Signature	Signature	Signature
SS#	SS#	SS#