



800-624-2408 ~ Fax: 800-785-5816
EQUIPMENT LEASE APPLICATION

VENDOR INFORMATION

Vendor Name: Vendor Code:
Address City: State: Zip:
Tel No.: () Fax No.: () Contact:

EQUIPMENT INFORMATION

Description: Equip. Cost:
 New Used Lease Term: Buyout: FMV 10% \$1 Other:

LESSEE INFORMATION

Full Legal Name: DBA:
Address: City: State: Zip:
Years In Bus.: No. of Employees.: Contact Person: Title:
Nature of Business: Telephone: Fax No.
Business Type: Corp. Prop. Partner Non-Profit LLC Tax ID #

PERSONAL INFORMATION

Officer: Social Security #: Title:
Address: City: State: Zip: Home Tel:
Officer: Social Security #: Title:
Address: City: State: Zip: Home Tel:

TRADE REFERENCES

Name: Telephone #: () Contact:
Name: Telephone #: () Contact:
Name: Telephone #: () Contact:

BANK INFORMATION

(Two Year History)

Bank Name: Checking Savings Loan
Telephone: () Contact Name: Acct. #:
Bank Name: Checking Savings Loan
Telephone: () Contact Name: Acct. #:

By signing below, each undersigned individuals(s), who either a principle of the credit applicant listed below, or a personal guarantor of its obligations, provides written instruction to Lease One or its designee (and any assignee or potential assignee thereof) authorizing review of his or her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the application of the credit applicant and subsequently for the purposes of update renewal, or extension of such credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be as a valid original. In addition to authorizing review of my/our credit profile from any national credit bureau the undersigned also authorizes my/our financial institutions and creditors to release credit information required by Lease One or its designee (and any assignee or potential assignee thereof.)

DATE

SIGNATURE

TITLE

DATE

SIGNATURE

TITLE