

## LEASE APPLICATION

Vendor Full Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Lessee Full Company Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Business Structure	No. of years in business	Type of Business	Sec. Deposit = 2 payments
___ Proprietorship    ___ Regular Corporation	_____	_____	___ Non-refundable \$100 fee
___ Partnership    ___ Other:	State of Registration: _____	_____	_____
___ S Corporation	_____	_____	Total Amount: \$ _____

Equipment Description	Equipment Cost	Monthly Payment Amount	End of Term Option:
_____	_____	_____	___ Purchase for FMV
_____	_____	Lease Term _____	___ Renew for FMV    ___ Return

NOTICE: IF YOUR APPLICATION FOR BUSINESS CREDIT IS DENIED, YOU HAVE THE RIGHT TO A WRITTEN STATEMENT OF THE SPECIFIC REASONS FOR THE DENIAL. TO OBTAIN THE STATEMENT, PLEASE CONTACT THE LESSOR NAMED HEREIN WITHIN 60 DAYS FROM THE DATE YOU ARE NOTIFIED OF OUR DECISION. WE WILL SEND YOU A WRITTEN STATEMENT OF REASONS FOR THE DENIAL WITHIN 30 DAYS OF RECEIVING YOUR REQUEST FOR THE STATEMENT. 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 THE APPLICANT HAS THE CAPACITY TO ENTER INTO A BINDING CONTRACT); BECAUSE ALL OF 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 FEDERAL TRADE COMMISSION, ECOA, COMPLIANCE, WASHINGTON, DC 20581.

**GUARANTOR INFORMATION REQUESTED FOR ALL CORPORATIONS IN BUSINESS LESS THAN TWO YEARS, AND ALL PARTNERSHIPS, PROPRIETORS, PROFESSIONALS AND SERVICE RELATED BUSINESSES.**

PERSONAL DATA

Name: \_\_\_\_\_ Home Address: \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Name: \_\_\_\_\_ Home Address: \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Background Information on Lessee / Partners / Officers

1. \_\_\_\_\_

2. \_\_\_\_\_

REFERENCES (LIST BANK OR BANKS, PREVIOUS BANK REQUIRED IF APPLICANT HAS BEEN AT PRESENT BANK LESS THAN TWO YEARS)

Present Bank of Applicant	Previous or Second Bank of Applicant
_____	_____

Branch: \_\_\_\_\_ Phone: \_\_\_\_\_ Branch: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Bank Officer:	Account No.	Name of Bank Officer:	Account No.
_____	_____	_____	_____

Provide three (3) Loan / Lease / Trade References: Name and Address Phone Acct. No. Contact High Credit

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

I AUTHORIZE THE RELEASE OF ANY CREDIT OR FINANCIAL INFORMATION TO LESSOR:

AUTHORIZED SIGNER & TITLE: **X** \_\_\_\_\_