



SELLER: _____

CONTACT: _____

PHONE: _____

EMAIL: _____

Phone: 800-813-0725 Fax: 888-813-2789

Email Contact: info@LeaseSource.Net

Scan/Email to info@leasesource.net or fax to: 888-813-2789

1. Corporate or Business Name _____
 DBA Name _____ YOUR WEBSITE: _____
 Address _____
 City _____ County _____ State _____ Zip _____
 Phone _____ FAX _____ email _____

2. Equipment Location: Same _____ Other _____

3. Type of Business _____ Years in Business _____ Term requested (2,3,4,5 yrs) _____

4. Principals: President, Owners, Partners, Members

Full Name	Social Security	Home Address & Zip	Title and % ownership

Fed Tax ID # _____ Proprietorship _____ Partnership _____ Corporation _____ LLC _____

5. Basic Description of Equipment _____
 Approximate Equipment Cost: \$ _____ New _____ Used _____

6. Lessee's Bank & Branch _____ Contact _____
 City & State _____ Years @ bank _____ Phone _____
Acct. # _____

Please include copy of equipment quote and the summary page of the last 3 bank statements

By signing below, the undersigned individual as principal of and/or guarantor for the applicant, authorizes broker or their assign, (Broker/Lessor/Debtor), its designee, assigns or potential assigns, to review his/her personal credit profile provided by national credit bureaus in considering this Application and for the purpose of the update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. A fax or photocopy of this authorization shall be valid as the original.

Signature _____ Date _____

Signature _____ Date _____