



EQUIPMENT LEASE APPLICATION

Please print, complete, sign, and fax back to (949) 625-8430 (no coversheet necessary).

CUSTOMER INFORMATION

LESSEE - Please attach signed business financial statements if in business less than 2 years.
Proprietor Corporation
Partnership Corp/Type
Non-Profit Corp/State
Legal Business Name & DBA:
Street Address: Contact: Ext:
Phone: Fax: E-Mail:
Website: Federal Tax ID #: D&B #: # of Employees:
Type of Business: Years in Business: Years/Current Ownership:

CREDIT REFERENCES - Please attach summary page of last 3 monthly bank statements. 3 trade/debt references required (No COD's).
Bank/Branch: Phone: Contact: Acct#:
Bank/Branch: Phone: Contact: Acct#:
Trade or Debt: Phone: Contact: Acct#:
Trade or Debt: Phone: Contact: Acct#:
Trade or Debt: Phone: Contact: Acct#:
Trade or Debt: Phone: Contact: Acct#:

PERSONAL - Please attach signed personal financial statement(s) if in business less than 2 years.
Principal's Name: SS#: Title: % Ownership:
Home Address: Home Phone: Own/Rent:
Principal's Name: SS#: Title: % Ownership:
Home Address: Home Phone: Own/Rent:

EQUIPMENT INFORMATION

Description/Use:
(eg, "LAN - IBM Server, 20 HP Workstations, Licensed Software, etc. - Replacing/Upgrading/Adding-to Existing System")
Lease Amount: Lease Term: End-of-Lease Option: Est. Installation Date:
(24-60 Months) (FMV, \$1BO, Other)
Location: Vendor Name & Phone:
(address if different from above or indicate "Same as Above") (Vendor company website address sufficient)
Additional Comments:

(Customer or Equipment Information - Use separate page if necessary)

The person(s) supplying the above information certifies to lessor that it is true and correct. The owners/partners/guarantors authorize lessor to investigate business and personal credit status, including consumer credit reports.

Applicant Signature: Date:
(Include Signature, Printed Name, & Title)