



Vendor/Contractor:		Telephone: _		Contact:	
LEGAL BUSINESS NAME:	Contact Name:				
Type of Business: C-Corp □	S-Corp □	Sole Proprietor □	Partnership	•	
Business Address					
	Business Description: E-mail address:				
			Years in business: (Current Ownership)		
Equipment Location Address: _					
	different from busin		· ,		
	PERSONAL	INFO ON OFFICERS, P.	ARTNERS AND GUARA	NTORS	
Officer 1:		Title:		Owner %:	
SSN:					
Home Address:		City:		St:Zip:	
Officer 2:		Title:		Owner %:	_
SSN:					
Home Address:		City:		St:Zip:	
Officer 3:					-
SSN:					
Home Address:		City:		St:Zip:	
		BANK AND PRIOR	LEASE REFERENCES		
Bank Name:		A/C #		Year Account Ope	ened:
Type of Account:	Contact:		Phone:	Fax: .	
Bank Name:		A/C #		ened:	
Type of Account:	Contact:		Phone:	F:	ax:
Lease History 1:		A/C #:		Tel:	
Lease History 2:		A/C #:		Tel:	
			TAGE INFORMATION		
Landlord:		Contact:		Tel:	
Mortgage Holder:		Contact:		Tel:	
Account Number:					
			NT DETAILS		
		EQUI ME	NI DETAILS		
Cost: \$		(Do not include sa	les tax). <u>Please provid</u>	e a copy of the equipme	nt/work proposal
Term Requested ☐ 2 years ☐ 3 years ☐ 4 years ☐ 5 years ☐ 7 years*					
	•	-			ctions >\$100,000,00
			-	years Available on Transa	•
I certify the information provid whatever inquiries about us dee agencies, and that individuals I receive written confirmation of	med necessary to herein named are	evaluate our credit app aware of this request.	olication, including cor Should application be	ntacting banks, trade refe e declined, I understand	erences and reporting
Owner:				Date:	
Owner:					
Owner:					
				<i>Duic.</i> _	