



TRANE[®]

LEASING SERVICES

Not-For-Profit (501c3)/Religious Organization Questionnaire

Phone: (800) 724-6026 Fax: (877) 331-3665

1)Organization Legal Name: _____

2)Organization Address: _____

3)Organization Phone: _____

4)What year did your organization begin? _____

5)How many active members does your organization have? _____

6)How many paid employees do you have? _____

7)What is your weekly collection? _____

8)What was your budget last year? _____ What is your budget for the current year? _____

9)What is your national affiliation and where are they located? _____

10)What is your business structure/governing body? _____

11)Who makes the business/financial decisions? _____

12)Who is your mortgage holder? _____

13)Are there any affiliated businesses operated from your location? _____

14)If yes, please list them: _____

15)What is the need for the new equipment? _____

16)Are you incorporated? If yes, in what state? _____

17)Under what name are you incorporated? _____

18)What is the name and account number on the checking account from which the invoices will be paid?

By: _____

Title: _____

Date: _____