



**VENDOR & EQUIPMENT INFORMATION**

Vendor Name	Equipment	Equipment Cost
Vendor Address	City	County
	State	Zip
Contact Person	Telephone Number	

**LESSEE COMPANY INFORMATION**

Company Name	Time In Business
Company Address	City
	County
	State
	Zip
Signer	Title
	Telephone Number
	Fax Number
Nature of Business	Type of Business:
	<input type="checkbox"/> Sole Proprietorship
	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Corporation
	<input type="checkbox"/> LLC

**PERSONAL INFORMATION ON OFFICERS, PARTNERS, OR GUARANTORS**

Name	Title	Social Security Number	Driver's License
Home Address	City	State	Zip
	How Long	Home Phone	
Name	Title	Social Security Number	Driver's License
Home Address	City	State	Zip
	How Long	Home Phone	

**COMPANY BANK REFERENCES - TWO YEARS**

Name of Bank and Branch	How Long	Telephone	Contact Officer
Checking Account Number	Savings Account Number	Loan Account Number	
Name of Bank and Branch	How Long	Telephone	Contact Officer
Checking Account Number	Savings Account Number	Loan Account Number	

**TRADE REFERENCES - TWO YEARS**

Name of Supplier	City	State	Telephone	Contact
Name of Supplier	City	State	Telephone	Contact
Name of Supplier	City	State	Telephone	Contact

**LEASE REFERENCES**

Name of Lease Company	City	State	Telephone	Contact
Name of Lease Company	City	State	Telephone	Contact

I/We hereby authorize you to whom this application is made, or your agents, to investigate My/Our credit worthiness and will provide financial statements, tax returns, etc., as you deem necessary. I/We warrant that the information submitted herein is true and correct and hereby authorize references contained herein to release any necessary information.

Signature X \_\_\_\_\_

Date: \_\_\_\_\_

Signature X \_\_\_\_\_

Date: \_\_\_\_\_