



LEASEPROCESS
EQUIPMENT LEASING & FINANCING SOLUTIONS

65 High Ridge Rd., #156
Stamford, CT 60905
Ph: 877.364.7377

BODYBUILDER FITNESS

Reggie Brown Ext. 270
Toll Free: 800.942.9830

LEASE APPLICATION

Application Fax: 720.898.9200

| COMPANY INFORMATION | | | | | | |
|---|--------------------|-------|------------|------------------------|------------------------------|-----------------|
| Full Legal Company Name | | | | Equipment Quote | | |
| Address | | | | <u>Amount</u> | <u>Term</u> | <u>Payment</u> |
| City | County | State | Zip | <u>Adv Pmts</u> | <u>Buy-Out</u> | <u>New/Used</u> |
| Contact Person | Telephone | | Fax | Equipment Description | | |
| E-Mail Address | Nature of Business | | Corp/Other | | | Yrs in Bus |
| Location of Equipment (if different than above) | | | | Yrs at Location | Est. Equipment Delivery Date | |

| PERSONAL INFORMATION FOR ALL OWNERS, OFFICERS AND GUARANTORS | | | | | |
|--|-------|------------------------|-----|-----------------------|--|
| Name | Title | Social Security Number | | % Ownership | |
| Home Address | City | State | Zip | Home Telephone Number | |
| Name | Title | Social Security Number | | % Ownership | |
| Home Address | City | State | Zip | Home Telephone Number | |
| List Other Owners | Title | Social Security Number | | % Ownership | |

| BANK REFERENCES | | | | |
|-----------------|-------------|--------------------|-----------|---------|
| Name of Bank | No. of Yrs. | Bus Acct Number(s) | Telephone | Contact |
| Previous Bank | No. of Yrs. | Bus Acct Number(s) | Telephone | Contact |

| TRADE REFERENCES | | | | |
|------------------|----------|----------------|-----------|---------|
| Main Supplier | Products | Account Number | Telephone | Contact |
| Other Supplier | Products | Account Number | Telephone | Contact |

| LANDLORD AND INSURANCE INFORMATION | | | | |
|------------------------------------|------------|---------------------|-----------|---------|
| Landlord for Equipment Location | No. of Yrs | City/State | Telephone | Contact |
| Business Insurance Company | No. of Yrs | Prop Damage & Liab? | Telephone | Contact |

Credit Authorization: I/We hereby authorize LeaseProcess, 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 updating, renewing, extending additional credit or the collection of any late account. I/We hereby authorize our references to release all credit information and I/We represent and warrant that the information submitted herein is true, complete and accurate. A facsimile, electronic or other copy of this authorization shall be as valid as the original.

| | |
|--|------|
| Signature(s) of all owners, officers and/or guarantors X | Date |
|--|------|