

8795 Ralston Road, Suite 225 Arvada, CO 80002 Toll Free: 800.942.9830

LEASEPROCESS EQUIPMENT LEASING & FINANCING SOLUTIONS EQUIPMENT LEASE APPLICATION

Ph (720) 898-8100 Toll Free (800) 942-9830 Fax (720) 898-9200

COMPANY INFORM	MATION							
Full Legal Company Name					Equ	Equipment Quote		
Address					Amount	<u>Term</u>	<u>Payment</u>	
City	County	State	Zip		Adv Pmts	Buy-Out	New/Used	
Contact Person	Telephone	Telephone			<u>Ec</u>	Equipment Description		
E-Mail Address	Nature of Bus	siness	Corp/Other Yrs in Bu		1			
Location of Equipment (if different than above)					Yrs at Location	Yrs at Location Est. Equipment Delivery Date		
PERSONAL INFOR	RMATION FOR AL	L OWNERS, (OFFICERS	AND GUA	RANTORS			
Name		Title	Title		Social Security Number		% Ownership	
Home Address		City		State	Zip	Home Telephone Number		
Name		Title		Social Security Number		ļ	% Ownership	
Home Address		City		State	Zip	Home Telepho	one Number	
List Other Owners		Title		Social Security Number			% Ownership	
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 Date								
X								