

CREDIT APPLICATION

Full Legal Name of Business _____ Ph # _____
 Address _____ Cell # _____
 City _____ County _____ State _____ Zip Code _____ Fax # _____
 Type of Business: Corp LLC Partnership Sole Prop Yrs Under Present Ownership _____
 Nature of Business _____ Tax ID # _____
 Owner(s) of Business _____ % Owned SS # _____
 _____ % Owned SS # _____
 _____ % Owned SS # _____
 _____ % Owned SS # _____
 Home Address _____ Ph # _____
 _____ Ph # _____
 _____ Ph # _____
 _____ Ph # _____

EQUIPMENT INFORMATION

QUAN.	MODEL	TYPE,MODEL/SERIAL NUMBER	PRICE

Location of Equipment _____ New Used _____
 Requested Term _____ Adv. Payments _____ Mo. Payment _____ Purchase Option _____
 Vendor Name _____ Contact _____ Ph # _____
 Address _____ Fax # _____

BANK CREDIT REFERENCE

BANK NAME	(BRANCH)	ACCNT. #	TYPE	CONTACT	PHONE #

BUSINESS TRADE CREDIT REFERENCES

SUPPLIER'S NAME	ACCNT. #	CITY, STATE	CONTACT	PHONE #

Landlord Name _____ Ph/Fax # _____
 Insurance Agent _____ Ph/Fax # _____
 Pending Legal Action Against Applicant Yes No If yes, explain _____
 Has Applicant Filed Bankruptcy or Assignment To Creditors In Last Seven Years? Yes No

AUTHORIZATION TO RELEASE INFORMATION

The undersigned certifies that all credit and financial information contained herein and submitted to *Capitol Leasing & Financing Service* or it's nominees is true and correct and lender may obtain any information necessary pertaining to this application including, all owners, officers, or guarantors. By signing below, the undersigned individual, who is either a principal of the credit applicant or a guarantor of it's obligations, provides this written authorization to *Capitol Leasing & Financing Service* or it's nominees to review his/her personal credit profile from a national credit bureau. A photostatt or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm our identity as true and correct.

 APPLICANT TITLE DATE APPLICANT TITLE DATE

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