



LEASE APPLICATION

**Lessee (Complete Legal Name of Entity):**

Company Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____ Fax: _____

Owner(s):

Please list all shareholders with > 10% ownership. If more than one, please include all information on an attached sheet.

Owner Name: _____

Home Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____ S.S.#: _____

Business Structure:

- Limited Partnership
 General Partnership
 Corporation
 Other
 Proprietorship

Nature of Business: _____

Years in Business: _____

Contact Person:

Name: _____ Title: _____

Phone: _____ Fax: _____ E-Mail: _____

Equipment Information:

Equipment Description: _____

Total Equipment Cost (\$): _____

Lease Term Requested: _____

End of Term Option: _____

Monthly Payment: _____

Vendor Information:

Vendor Contact: _____ Vendor Phone: _____

Bank Reference:

Bank Name _____

Street _____ City _____ Phone _____

Type Acct _____ Acct # _____ Contact _____

Financial Information:

Annual revenue for the last 3 Year _____

Number of years in business _____

Tangible net worth _____

Credit Release:

I/we authorize First American Equipment Finance to examine my/our credit standing and financial situation (both for the above referenced company and its shareholders). I/we authorize my/our bank(s) and/or trade references to release information to First American Equipment Finance regarding my/our accounts with them.

Signature _____ Date _____

All rates include a one-month deposit applied to the last payment due under the lease and are subject to the additional terms and conditions of First American's standard master lease agreement.

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