

Commercial Lease Application

Lessee Information			
Business:			
Address:			
City:	State:	Zip Code:	
Phone Number:			
Type: Sole Proprietor Partnersh	p Corporation	n LLC	
Years in Business:	Fed Tax ID #:	DUNS #:	
Guarantor #1:	Social Security #:		
Address:			
City:	State:	Zip Code:	
Bank Name:			
Account Number:			
Contact:	Phone Number:		
Trade Reference 1:			
Contact:	Phone Number:	Phone Number:	
Trade Reference 2:			
Contact:	Phone Number:	Phone Number:	
Trade Reference 3:			
Contact:	Phone Number:		
Equipment Information			
Vendor:			
Address:	01-1	7:-0-1	
City:	State:	Zip Code:	
Phone Number:			
Contact: Pat Temme			
Equipment:	15		
Cost:	Payment:		
Guarantor #2 (If Applicable)			
Applicant's Name: Current Home Address:			
City:	State:	Zip Code:	
Phone Number:	Date	of Birth:	
Social Security #:	Employer:		
Title:	% Ownership:		
) <u>.</u> e		
Applicant represents that this Equipment is being leased for business and/or professional purposes and agrees that under no circumstances shall this Lease by construed as a consumer contract. The undersigned applies for the Lease indicated in this application. Everything stated in this application is correct. US Equity Funding and its Authorized Affiliates are authorized to check my credit and employment history for the purposes of determining my credit and for the further purpose of reviewing the account, taking collection activity on the account, and skip tracing. US Equity Finding and its Authorized Affiliates (assignees, potential assignees, leasing partners, or funding sources) are authorized to provide history information to others about credit standing and your credit experience with me, including but not limited to credit bureaus, other companies, out site collection agencies and outside attorneys.			
APPLICANT #1	APPLICANT #2		
Authorized Signature	Authorized Signature		
	(if applicable)		
Print Name Date	Print Name	Date	