



EQUIPMENT LEASE CREDIT APPLICATION

Phone:

Fax:

COMPANY INFORMATION			
Full Legal Name:		DBA Name:	
Billing Address:		City/State/Zip:	County:
Equipment Location Address:		City/State/Zip:	County:
Contact Name:		Business Start Date:	Present Ownership Since:
Phone:		Fax:	Annual Sales :
Email Address :		Web Address:	
State of Incorporation:	Federal Tax ID#:	Nature of Business:	
Business Type: S Corp C Corp Limited Liability Company Partnership Sole Proprietor Non-Profit			

OWNERS, PARTNERS OR GUARANTORS		
1. Name:	Title:	Social Security #:
Address:	Home Phone:	Cell Phone:
City/State/Zip:	Percent Ownership:	Birth Date:
2. Name:	Title:	Social Security #:
Address:	Home Phone:	Cell Phone:
City/State/Zip:	Percent Ownership:	Birth Date:

BANK INFORMATION	
Name of Bank:	Deposit/Check Acct #:
Bank Contact:	Phone Number:

EQUIPMENT INFORMATION	
Description:	Estimated Cost:
Vendor Name:	Contact Person:
Address:	City/State/Zip:
Phone:	Fax:
Estimated Delivery Date:	<input type="checkbox"/> New Equipment <input type="checkbox"/> Used Equipment
End of Lease Options: <input type="checkbox"/> \$1 Purchase Option <input type="checkbox"/> Other	Term Requested: <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> Other

Credit Authorization: I/We hereby authorize Wirth Business Credit, Inc., its assignee, assigns or potential assigns to review my personal credit and business 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 the above listed parties to release all credit information and bank information and I/We represent and warrant that all information submitted to Wirth Business Credit, Inc., including without limitation information on this application, any attachments, any supplemental, or other information herein is true, complete and accurate. I agree to immediately notify Wirth Business Credit, Inc. if any of such information changes materially in the 60 days after the date of this application. 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:
1.	
2.	Date: