



Johnny H. Do

LEASE APPLICATION

2099 S. State College Blvd – Anaheim, CA 92806

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COMPANY INFORMATION

COMPANY NAME EXACT LEGAL NAME TELEPHONE NUMBER

ADDRESS CITY COUNTY STATE ZIP

YEARS IN BUSINESS SOLE PROP. / PARTNERSHIP / CORPORATION DATE OF INC. / /

TYPE OF BUSINESS

COMPANY BANK NAME TEL. NUMBER / CONTACT ACCOUNT NUMBER

COMPANY BANK NAME (ADDITIONAL IF AVAILABLE) TEL. NUMBER / CONTACT ACCOUNT NUMBER

TRADE REFERENCES (SUPPLIERS) TEL. NUMBER CONTACT PERSON

TRADE REFERENCES (SUPPLIERS) TEL. NUMBER CONTACT PERSON

PRINCIPAL INFORMATION (ON OFFICERS, PARTNERS OR GUARANTORS)

NAME TITLE SOCIAL SECURITY NUMBER

HOME ADDRESS CITY / STATE / ZIP HOME PHONE NUMBER

NAME TITLE SOCIAL SECURITY NUMBER

HOME ADDRESS CITY / STATE / ZIP HOME PHONE NUMBER

VENDOR INFORMATION EQUIPMENT SELLER

NAME ADDRESS CITY / STATE / ZIP

TELEPHONE NUMBER FAX NUMBER CONTACT

EQUIPMENT TYPE (REQUIRED) AMOUNT (REQUIRED) BUDGETED MONTHLY PAYMENTS

Applicant warrants that all the information provided to the Lessor is true and correct, and authorizes Alliance Funding Group, Inc. and/or its affiliates to investigate applicants credit worthiness as may be needed. The undersigned authorizes all banking institutions, credit reporting agencies, trade references and its agents to release all necessary information via telephone, mail or facsimile as requested, for the purpose of securing a lease.

CUSTOMER NAME TITLE

X
CUSTOMER SIGNATURE (REQUIRED) DATE