



Lease Application

Credit Processing

Phone: (800) 748-0015

Fax: (800) 968-2808

LESSEE (exact legal name required)	
Name	
Address	
City/State/Zip	
Telephone Number	Fax Number
Contact Person	E-mail Address

SUPPLIER	
Name	
Address	
City/State/Zip	
Telephone Number	Fax Number
Salesperson	

EQUIPMENT DESCRIPTION:		
<input type="checkbox"/> New <input type="checkbox"/> Used		
Equipment Location (if other than above)		State of Incorporation
Nature of Business	Time in Business Years _____ Months _____	Federal Tax Id #
Type of Business: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government <input type="checkbox"/> Other		
Lease Term _____	Purchase Option	<input type="checkbox"/> FMV <input type="checkbox"/> 10% <input type="checkbox"/> \$1.00
Security Deposit(s) <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2	OR	Advance Payment(s) <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2
Monthly Payment \$ _____	Plus Tax \$ _____	Total Payment \$ _____

BANKS			
Bank Name		Bank Name	
1.		2.	
Type of Account	Account Number	Type of Account	Account Number
Contact Officer	Telephone Number	Contact Officer	Telephone Number

TRADES			
Name		Name	
1.		3.	
Telephone Number		Telephone Number	
Name		Name	
2.		4.	
Telephone Number		Telephone Number	

If corporation in business less than three years, or partnership/proprietorship, please provide the following on principals:			
Name	Home Address	City/State/Zip	Social Security Number
Name	Home Address	City/State/Zip	Social Security Number

SIGNATURE / RELEASE	
It is expressly understood that this constitutes an application only and in itself shall not be binding upon either party. Additionally, I / we authorized Ervin Leasing to investigate the banks, savings and loan and trade references listed, and if required by Ervin Leasing, to perform personal credit investigations on the corporate principals, partners or proprietor listed above.	
Authorization: _____	Date: _____
Authorization: _____	Date: _____