



To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

BUSINESS INFORMATION

Name of Business:		DBA:		Federal ID #:		
Address:			City:	State:	Zip:	
Billing Address:			City:	State:	Zip:	
County:	Phone #:	Fax #:	Email Address:		Website:	
Nature of Business:		Type of Business:	Sole Proprietorship	Corporation	Partnership	LLC
Years in Business:		U.S. Citizen:	Yes	No	Gross Annual Revenue:	

PERSONAL INFORMATION - Include copy of driver's license(s). If additional space is needed, please attach separate sheet.

Name (First/MI/Last):		Title:	% Ownership:	Social Security #:	DOB:	
Home Address:		City:	State:	Zip:	Phone #:	Email Address:
Name (First/MI/Last):		Title:	% Ownership:	Social Security #:	DOB:	
Home Address:		City:	State:	Zip:	Phone #:	Email Address:

DEALER & EQUIPMENT INFORMATION - Attach quote or available invoice

Dealer's Name:			Phone #:		Contact Person:
Year:	New Used	Price:	Make/Model:	Description:	Equipment Location Address:
Haul Reference Name:			Phone #:		Officer:
Nearest Relative Name:			Phone #:		Relationship:

PAYMENT PLAN

Term in Months:	Type of Transaction:				Equipment Cost:	Advance Payment:
24 36 48 60 72	FINANCE LEASE				\$	\$

FINANCIAL SUMMARY - Complete this financial summary or include balance sheet/income statement, additional financial info may be requested.

Total Assets: \$	Own - # Trucks:	# Trailers:	Applying for a replacement unit?	Yes No
Trucking Revenue: \$	Describe operation and product(s) hauling:			

COMPANY BANK REFERENCES

Bank Name:	Phone #:	Contact Person:
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By providing the above information, I/we certify the information provided above is true and complete and authorize Falcon Leasing to whom this application is made, or your agents, to investigate my/our financial responsibility and credit worthiness and will provide financial statements, tax returns, etc. as deemed necessary. I/we authorize Falcon Leasing to update my/our credit profile from time to time in the future as you deem appropriate.

We intend to apply for joint credit

Applicant Initials: _____

Co-Applicant Initials: _____

X _____
Applicant Signature

_____ Date

X _____
Co-Applicant Signature

_____ Date