

Equipment Lease Application

Please scan and email to dan@indyconsultinggroup.com

CORPORATE INFORMATION:		VENDOR INFORMATION:	
COMPANY _____		VENDOR NAME _____	
DBA NAME _____		STREET _____	
STREET _____		CITY _____ STATE _____ ZIP _____	
CITY _____ STATE _____		PHONE _____	
CONTACT _____ ZIP _____		FAX # _____	
PHONE _____ FAX _____		SALES REP _____	
<input type="checkbox"/> CORPORATION	<input type="checkbox"/> PROPRIETORSHIP	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> _____
DATE ESTABLISHED _____	TYPE OF BUSINESS _____	FED TAX ID # _____	
EQUIPMENT INFORMATION:			
EQUIPMENT COST <small>(excluding sales tax)</small> _____	TERM _____	OPTION _____	
EQUIP. LOCATION <small>(if different from above)</small> _____		COUNTY _____	
EQUIPMENT DESCRIPTION <small>(mfg./make/model)</small> _____			
TRADE REFERENCES: (NO C.O.D. ACCOUNTS, PLEASE)			
COMPANY _____	CONTACT _____	PHONE _____	
COMPANY _____	CONTACT _____	PHONE _____	
COMPANY _____	CONTACT _____	PHONE _____	
BANK REFERENCE: (Provide at least 2 year history)		CREDIT REFERENCE (LEASE OR LOAN ACCOUNT):	
BANK _____		BANK _____	
ACCT. # _____		ACCT. # _____	
CONTACT _____		CONTACT _____	
PHONE _____		PHONE _____	
<small>(if account less than 2 years please provide previous bank information)</small>		<small>(Provide only if requested amount is over \$50,000.00)</small>	
OWNER / STOCKHOLDER INFORMATION:			
NAME _____		NAME _____	
STREET _____		STREET _____	
CITY _____ STATE _____ ZIP _____		CITY _____ STATE _____ ZIP _____	
TITLE _____ SS# _____		TITLE _____ SS# _____	
AUTHORIZATION TO RELEASE INFORMATION:			
<p>By signing below, the undersigned individual, who is either a principal of the credit applicant or a guarantor of it's obligations, provides this written instruction to Independence Consulting Group, LLC, it's assigns or nominees, authorizing review of his/her personal and/or business credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit or additional credit and for reviewing and collecting the resulting account. A Photostat, scanned or facsimile copy of this authorization shall be valid as the original. By signing below, I/we affirm our identity as the respective individuals identified in the related application. Use additional sheets if necessary. Rates, terms and conditions will be returned to you within 72 hours, unless further documentation is necessary.</p>			
APPLICANT SIGNATURE _____		DATE _____	

Borrowers Signature Authorization

I hereby authorize Independence Consulting Group, LLC, its affiliates and/or assigns and designates permission to verify my past and present earnings records, bank accounts, stock holdings, and any other asset balances that are needed to process my loan/lease application. I further authorize the Independence Consulting Group, LLC, its affiliates and/or assigns and designates, to order a consumer and/or business credit report and verify other credit information, including past and present revolving, installment, mortgage and landlord references. It is understood that a copy of this form will also serve as authorization. The information Independence Consulting Group, LLC, its affiliates and/or assigns and designates, obtains is only to be used in the processing of my application for a business loan/lease.

Borrower #1 Printed Name: _____ Social Security #: _____

Address: _____

Signature: _____ Date: _____

Borrower #2 Printed Name: _____ Social Security #: _____

Address: _____

Borrower: _____ Date: _____

Borrower #3 Printed Name: _____ Social Security #: _____

Address: _____

Borrower: _____ Date: _____

Borrower #4 Printed Name: _____ Social Security #: _____

Address: _____

Borrower: _____ Date: _____

Borrower #5 Printed Name: _____ Social Security #: _____

Address: _____

Borrower: _____ Date: _____

Borrower #6 Printed Name: _____ Social Security #: _____

Address: _____

Borrower: _____ Date: _____

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective borrower under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective borrower may be rejected.

*Additional pages may be used for additional borrowers.

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