

CANON FINANCIAL SERVICES, INC.

14904 Collections Center Drive Chicago, Illinois 60693 Tel.: (800) 220-0200

Lease ApplicationCFS-1040 (10/18)

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 enters into a lease. This means that when you enter into a lease, we will ask for, among other things: (1) your federal tax identification number, and (2) your date of birth, if you are a sole proprietor. We may also ask to see identifying documents.

CUSTOMER INFORMATION						
COMPANY LEGAL NAME: DBA NAME:						
PHONE:	FAX:	WEBSITE ADDRESS	:			
BUSINESS ADDRESS:		CITY:	COUNT	ΓY:	STATE: ZIP:	
HEADQUARTERS/PARENT ADDRESS:		CITY:	COUNT	ΓY:	STATE: ZIP:	
CONTACT PERSON FO	OR ADDITIONAL INFORMATIO	DN: TITLE:	EMAIL	EMAIL:		
TYPE OF BUSINESS:	☐ Corporation ☐ LLC	Sole Proprietor	Partnership	Non-Profit	State Local Government	
FEDERAL TAX ID#:	D & B NUMBER STATE WHER		RE ORGANIZED: NATURE OF BUSINESS:		INESS: YEARS IN BUSINESS:	
PERSONAL INFORMATION PRINCIPAL'S NAME: SOCIAL SECURITY NUMBER: OWNERSHIP %: HOME PHONE: DATE OF BIRTH:						
PRINCIPAL'S NAME:	AL'S NAME: SOCIAL SECURITY NUMBER:			HOME PHONE:	DATE OF BIRTH:	
HOME ADDRESS:	CITY	:	STATE: 2	ZIP:	EMAIL:	
ACKNOWLEDGEMENT AND AUTHORIZATION						
Customer warrants that all information in this application is accurate. The person signing below, as an individual and as an authorized representative of the Customer, authorizes the above references, any credit reporting agency, or other third party (including CFS) to collect and release any credit information concerning the above named company or principal (including consumer credit reports) to CFS, its affiliates and their respective designees or assignees. Customer agrees that equipment leased from CFS will be used solely for business or commercial purposes. Customer agrees that CFS may accept a facsimile or other electronic transmission of this Lease Application as an original, and that facsimile or other electronically transmitted copies of Customer's signature will be treated as an original for all purposes.						
SIGNATURE:		PRINTED NAI	ME·		DATE:	
***** DEALER INFORMATION – FOR INTERNAL USE ONLY *****						
QUANTITY MAKE / MODEL / DESCRIPTION			<u> </u>	NEW / USED / DEMO		
LEASE TERM:	MONTHLY PAYMENT:	RATE FACTOR:	PURCHASE		l out-	
months			☐ FMV	\$1.00	Other	
EQUIPMENT COST:		0501				
UPGRADE COST: CFS Lease Number / Serial Number: BUYOUT COST: Leasing Company / Vendor:						
BUYOUT COST:						
OTHER COST:			Describe:			
TOTAL AMOUNT:						
MSRP / LIST PRICE:						
DEALER:		BRANCH:		SALES	S REP:	
PHONE:		EMAIL:			FAX:	

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants (1) on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); (2) because all or part of the applicant's income is derived from any public assistance program; or (3) because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580. If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain the statement, please contact the office listed above within sixty (60) days from the date you are notified of our decision. We will send you a written statement of the reasons for the denial within thirty (30) days of your request for the statement.

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