



Business Information

CREDIT APPLICATION

LEGAL BUSINESS NAME	PHONE	WHAT DOES THE BUSINESS DO?
BUSINESS ADDRESS (STREET)	FEDERAL TAX ID #	DATE BUSINESS STARTED
BUSINESS ADDRESS CITY STATE ZIP	BUSINESS STRUCTURE (CORP, LLC, SOLE PROP)	HOW LONG HAVE YOU OWNED THE BUSINESS
WEBSITE ADDRESS	REASON FOR PURCHASE	
LOCATION OF EQUIPMENT (IF DIFFERENT THAN ABOVE)		

Guarantor(s) Information

PRINCIPAL'S NAME	TITLE	% OWNERSHIP	EMAIL ADDRESS
HOME ADDRESS (STREET)	HOME PHONE NO	MOBILE PHONE NO	
HOME ADDRESS CITY STATE ZIP	DATE OF BIRTH	SOC SEC NO	
PRINCIPAL'S NAME	TITLE	% OWNERSHIP	EMAIL ADDRESS
HOME ADDRESS (STREET)	HOME PHONE NO	MOBILE PHONE NO	
HOME ADDRESS CITY STATE ZIP	DATE OF BIRTH	SOC SEC NO	

Vendor and Equipment Information

VENDOR NAME	VENDOR CONTACT	VENDOR PHONE	VENDOR EMAIL
VENDOR ADDRESS	VENDOR CITY	VENDOR STATE	VENDOR ZIP
EQUIPMENT TO BE LEASED			EQUIPMENT COST
LEASE TERM		PURCHASE OPTION	
<input type="checkbox"/> 24 mo <input type="checkbox"/> 36 mo <input type="checkbox"/> 48 mo <input type="checkbox"/> 60 mo <input type="checkbox"/> 72 mo <input type="checkbox"/> Other		<input type="checkbox"/> 10% <input type="checkbox"/> \$1 out <input type="checkbox"/> EFA <input type="checkbox"/> FMV	

Authorization for Credit Inquiry

Applicant(s) certify the above information is complete and accurate, is not misleading or does not have any material omission, and that the applicant intends for **GE Financial Services, LLC** to rely on the information in deciding whether or not to enter into the transaction. The Applicant(s) authorize **GE Financial Services, LLC**, it's subsidiaries, it's agents and/or assigns, to verify the information contained herein and to make such additional inquiries as reasonably may be associated with this Application for future credit purposes, from banks, Lessors, other lending institutions, credit bureaus, business creditors, and other references listed or unlisted on this Application, and that such information, along with this Application, shall remain the Lessor's property. Lessee also agrees for this information to be transmitted over the Internet and a fax or photocopy of this application shall be valid as the original. Lessee further consents to receive all fax communications sent by or on behalf of **GE Financial Services, LLC** and its subsidiaries.

X _____ Date: _____

X _____ Date: _____