



Equipment Leasing Application

① Business Information ② Owner Information ③ Docs & Confirmation

GoKapital, Inc.

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Questions? Call us [1-866-257-2973](tel:1-866-257-2973)

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Sales Agent:

Company Information:

Legal Company Name (& DBA): *

Legal Entity:

☐ LLC ☐ Corporation ☐ Sole Prop.

Website:

Industry:

Incorporation State: *

Tax ID: *

Business Address: *

Business Start Date: ***Business Telephone #: *****Average Monthly Revenue: *****Monthly Credit Card Processing:****Requested Financing Amount: *****Use of Funds: *****Equipment Value: *****Equipment Type: *****Existing Business Loan/Advance:**☐ Yes ☐ No**Do you Own or Rent Location:**☐ Rent ☐ Own**Monthly Rent/Mortgage:****Landlord/Bank Name:****Landlord Phone:****Next >****Save**