Email completed form to:

dlukridge@fleetwoodfinancial.net



FLEETLEASE APPLICATION

APPLICANT INFORMAT	ION		
Legal Name:		Telephone #:	
dba	_	Fax #:	
Business Address:			
Website:	Contact:		
Year in Business:	Fed Tax ID:		
Nature of Business:			
EQUIPMENT INFORMAT	TION		
Supplier:		Contact:	
Description:		Selling Price:	
PRINCIPALS / OWNERS	(if applicable):		
Name:	SS#:		
Name:	SS#:		
Name:	SS#:		
The undersigned individual, recognizing that his or her individual credit history may be a factor in the evaluation of the credit of the applicant, hereby consents to and authorizes Fleetwood Financial and any assignee, lender or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim they would otherwise have under Fair Credit Reporting Act in the absence of this continuing consent. By: By: By:			