



**BILTMORE LEASING**  
 2415 E. Camelback Rd., Suite 700, Phoenix AZ 85016  
 (602) 840-0404 (800) 840-0406

**LESSEE INFORMATION**

Business Name: \_\_\_\_\_ Federal ID \_\_\_\_\_  
 Contact: \_\_\_\_\_ Email: \_\_\_\_\_  
 Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Corporation/LLC Name/Title of Officer Signing \_\_\_\_\_  
 \_\_\_\_\_ Partnership Type of Business \_\_\_\_\_  
 \_\_\_\_\_ Proprietorship Year started in business \_\_\_\_\_  
 Principal's Name: \_\_\_\_\_ SSN# \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Percent of ownership \_\_\_\_\_ % Mobile Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

**EQUIPMENT INFORMATION**

Vendor Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Equipment Description: \_\_\_\_\_  
 Cost of Equipment w/o tax \$ \_\_\_\_\_  
 Equipment Location: \_\_\_\_\_  
 Terms Wanted: \_\_\_\_\_ Months \$1.00\_\_ FMV\_\_

**CREDIT INFORMATION**

Bank: \_\_\_\_\_ Chk Acct. # \_\_\_\_\_  
 City \_\_\_\_\_ Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Contact \_\_\_\_\_  
 Trade Reference No. 1 \_\_\_\_\_ City \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ Contact \_\_\_\_\_  
 Trade Reference No. 2 \_\_\_\_\_ City \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ Contact \_\_\_\_\_

**Credit Release Authorization**

By signing below, the undersigned individual as principal of and/or guarantor for the applicant, authorizes BILTMORE LEASING CORP., its designee, assigns or potential assigns, to review his/her personal credit profile provided by national credit bureaus in considering this Application and for the purpose of the update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. A fax or photocopy of this authorization shall be valid as original.

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