PLEASE PRINT CLEARLY AND USE BLACK INK.

Equiptool, Inc. — Lease Application

9560 Owensmouth Avenue, Chatsworth, California 91311 • Phone 866-622-0242 • Fax 818-678-4385

Date: **FINANCE APPLICATION** **Sales Rep:**

BUSINESS

Business Name (Lessee)				Telephone: Cell: Fax:
Billing Address	City	State	Zip	
Nature of Business	Time Owned Business	Age of Business		
Location of Equipment	City	State	Zip	Federal Tax I.D.

OWNERSHIP

Sole Proprietorship ☐ Partnership ☐ Corporation ☐ (only list name(s) that appear on the business license)		State of Incorporation
Principal Name	Title	Soc. Sec No.
Home Address		Home Phone
Principal Name	Title	Soc. Sec. No.
Home Address		Phone

BANK

Bank	Address	City	State	Zip	Telephone No.
Officer's Name	Account No.	Business / Personal	Checking / Savings		

TRADE REFERENCES

Company Name	Telephone #	Contact Person

EQUIPMENT

Description	Model	Cost

Each individual signing below certifies that the information provided in this credit application is accurate and complete. Each individual signing below authorizes you or any lender or funding source which may be utilized (collectively referred to as "Lenders") to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit requested, but also for purposes of reviewing this account, increasing the credit line on the account (if applicable), taking collection action on the account, and for any other legitimate purpose associated with the account as may be needed from time to time. Each individual signing below waives any right or claim which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.

X_____ _____ _____

Signature | Signer's Printed Name | Date

X_____ _____ _____

Signature | Signer's Printed Name | Date