LEASE CORPORATION OF AMERICA

Credit Application

Financing you can trust.sm

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The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing that the applicant has the legal capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program or because the applicant has, in good faith, exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.

FINANCE, EQUIP	MENT AND VEN	DOR	INFOR	MATIO	ON 📕											
FINANCING REQUEST(S)	 EQUIPMENT FINANCING WORKING CAPITAL 		; EQUIPMENT							COST			PROPOSED TERM (MO)			
TITLED VEHICLES			IS THE EQUIPMENT		N EW	W 🔲 USED		ED	HAS THE EQUIPA		UIPM	MENT BEEN D		DELIVERED?	YES	
VENDOR NAME					CONTACT			PH			РНС	IONE				
PHYSICAL ADDRESS (REQD)				CITY				STATE		ZIP			EMA	AIL		
APPLICANT COM																
LEGAL NAME (AS STATED ON ARTICLES OF ORGANIZATION)					DBA							CON	ONTACT			
PHYSICAL ADDRESS (REQD)				CITY	CITY		STATE			ZIP			CONTACT EMAIL			
EQUIPMENT LOCATION IF DIFFERENT THAN PHYSICAL ADDRESS				1		CITY				I			STATE		ZIP	
NATURE OF BUSINESS	FEDERAL ID# (9 DIGITS)					PHO	PHONE				WEBS	BSITE				
	LEAST 51% OF THE COMPANY IS VNED BY AN INDIVIDUAL(S) WHO IS A US CITIZEN BUSINES					PART			BUSINES START DA			NUMBER OF EMPLOYEES				
	MANENT RESIDENT			N-PROFIT		PROPRIETORSHIP LLC CONTROL DATE CONTROL			L		GROSS ANNUAL REVENUE					
PERSONAL GUA	RANTOR(S) INFO	DRM/	ATION													
1) NAME					TITLE				%	owners	HIP			PHONE		
HOME ADDRESS						CIT	CITY			STATE		ZIP				
EMAIL	IMMIGRATION STATUS			atus 🕻	US CITIZEN DPERMANENT RESIDENT DNEITHER				HER	R SSN						
YOU AUTHORIZE US TO INVESTIC YOUR CREDIT AS PROVIDED BELO	SATE SIGNATURE													DATE		
2) NAME					TITLE				%	owners	HIP			PHONE		
HOME ADDRESS				I	CITY				STATE			ZIP				
EMAIL		IMMIG	ration st.	atus 🕻		EN		RMANEI	NTF	RESIDENT		NEITH	HER	SSN		
YOU AUTHORIZE US TO INVESTIC YOUR CREDIT AS PROVIDED BELO	SATE SIGNATURE													DATE		
ADDITIONAL CO	MPANIES OWN	ED														

LEGAL NAME	TIME IN BUSINESS	ADDRESS	CITY	STATE	ZIP
LEGAL NAME	TIME IN BUSINESS	ADDRESS	CITY	STATE	ZIP

I/We hereby request and authorize you, Lease Corporation of America, ("LCA") to whom this application is made, or your agents or assigns, to investigate my/our credit worthiness and will provide financial statements, tax returns, etc., as you deem necessary. By the execution of this application, I/we warrant that the information submitted herein is true and correct and hereby authorize references contained herein to release any requested information. I/we hereby request any above named entity to consider this to be our written request to release all information requested by LCA to LCA. We also hereby acknowledge receipt of a copy of this application. I/ we certify that I/we are United States citizens or United States permanent resident.

SIGNATURE	DATE

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact LCA, (3150 Livernois Rd., Suite 300, Troy, MI 48083, 800.8008098 or credit@leasecorp.com) within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your written request for the statement.