

United Leasing, Inc.

Lease Application

Lessee Information

Legal Bus. Name:	
Doing Business As:	
Address:	
City, State, Zip:	
Contact:	
Telephone:	Web Address:
Fax:	Email Address:
Equipment Location Address (if different than above):	
Federal Tax ID#:	

Business Information

Type of Business (Check One):	<input type="checkbox"/> Corporation	<input type="checkbox"/> LLC	<input type="checkbox"/> Partnership	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Other
Years in Business:	Annual Revenues: \$	Number of Employees:			
Current Average EFT (all clubs):	# Members:	# Clubs:			

Principals/ Guarantors

Name:	DOB:	SSN#:	US Citizen: Y <input type="checkbox"/> N <input type="checkbox"/>	Ownership %
Home Address:		Cell #	email:	Years Owned
Name:	DOB:	SSN#:	US Citizen: Y <input type="checkbox"/> N <input type="checkbox"/>	Ownership %
Home Address:		Cell #	email:	Years Owned
Name:	DOB:	SSN#:	US Citizen: Y <input type="checkbox"/> N <input type="checkbox"/>	Ownership %
Home Address:		Cell #	email:	Years Owned
Name:	DOB:	SSN#:	US Citizen: Y <input type="checkbox"/> N <input type="checkbox"/>	Ownership %
Home Address:		Cell #	email:	Years Owned

Equipment Details	Lease Structure
-------------------	-----------------

Vendor:	Term (Mths) : 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> Other _____
Description:	
Equipment Cost:	

Company Bank References

Bank Name:	Yrs:	Acc #	Phone ()	Contact:
Bank Name:	Yrs:	Acc #	Phone ()	Contact:

Trade References

Supplier Name:	Yrs:	City/State:	Phone ()	Contact:
Supplier Name:	Yrs:	City/State:	Phone ()	Contact:

I/we hereby authorize United Leasing, Inc., or their agents, to investigate my/our credit worthiness including retrieving consumer credit reports or any background checks at any time. I/We will provide financial statements, tax returns, etc., as you deem necessary. I/we **Warrant And Affirm** that the information submitted herein is true and correct and hereby authorize references contained herein to release any necessary information. Further, I/we understand that United Leasing, Inc. reserves the right to reverse any credit decision if the information contained herein is found to be incorrect. I/we warrant that I/we will indemnify United Leasing, Inc. for any and all costs incurred with this application for credit including any cost incurred in the placement or reservation of the intended leased equipment based on information contained herein. The USA PATRIOT act requires financial institutions to obtain, verify, and record identifying information for each person or entity that applies for financing. Therefore, this application must include the applicant's exact legal name, address, tax ID number, social security number and date of birth.

Signature: _____ Printed Name: _____ Date: _____

Signature: _____ Printed Name: _____ Date: _____

Creative Business Solutions Through Leasing



Fax completed application to: **812 485 3687**
 For additional information please contact
812 479 0231 or 800 742 3928
 3700 E. MORGAN AVENUE ■ EVANSVILLE, INDIANA 47715

