Commercial Lease Application

DEA	LER NAM	DE	DEALER CODE						
DEALED DECEDENCE #									
DEALER REFERENCE #									
	1	1	1		1	1	1		
	'	1	1	1	1	'			



PHONE: 877 • 868 • 3800 FAX:

= denotes required fields

781•994•4775 WWW.TIMEPAYMENT.COM

LESSEE INFORMATION (Eq	uipment User)							
* LEGAL BUSINESS NAME		*TYPE OF BUSINESS:						
DBA NAME		☐ CORPORATION ☐ LIMIT	ED LIABILITY COMPANY PR	ROPIETORSHIP PARTNERSHI				
* STREET ADDRESS		BILLING ADDRESS (if diffe	rent):					
CITY	STATE ZIP	NAME						
EMAIL ADDRESS		STREET						
BUSINESS PHONE	* YEARS IN BUSINESS	CITY	STATE	ZIP				
FEDERAL ID NUMBER	(required for business alone)							
INITIAL FUNDING INFORM	MATION							
EQUIPMENT TYPE:		*FILL IN ONE OF THE FOLLOWING FIELDS:						
		BASE MONTHLY PAYME	ENT:\$FOR	R MONTHS (TERM)				
		OR TOTAL FUNDED AMOUNT: \$						
*GUARANTOR INFORMAT	FION (Include all owners to ac	count for 100% of compa	ny ownership unles	s Business Alone)				
GUARANTOR INFORMATION 1	OWNERSHIP %:							
SIGNER #1 NAME		STREET ADDRESS						
SS#	_ DATE OF BIRTH	CITY	STATE	ZIP				
TITLE EMAIL AD	DRESS	HOME PHONE	CELL PHONE					
GUARANTOR INFORMATION 2	OWNERSHIP %:							
SIGNER #1 NAME		STREET ADDRESS						
SS#	_ DATE OF BIRTH	CITY	STATE	ZIP				
TITLEEMAIL AD	DRESS	HOME PHONE	CELL PHONE					
this shall not be construed as a coagree TimePayment Corp., its auticonsent and authorize TimePayment communication, including but not prerecorded messages and/or SN TimePayment Corp. and our affilicredit and employment history for the same transaction or extension collection activity on the account history information to others about outside collection agencies and outside collection agencies are considered.	applying for this Lease for this Equip insumer contract. I further certify the horized affiliates, assigns and agents ent Corp., and its affiliates, assigns, at limited to, calls placed to my home, MS text messages, and emails regar ates or assigns. I expressly consent a or the purposes of determining my croin of credit, or for other promotional and skip tracing. TimePayment Corput my credit standing and credit expendiculated attorneys. I agree to conduct the	information provided in this application whom agents to share and use all in business, or cellular telephonomic and authorize TimePayment Control authorize TimePayment Control authorities and for the further, and its authorized affiliates are rience with me, including but no manual transactions for this Lease for the form that the control authorities and the first authorities are seen to the control authorities and the control authorities are seen authorities.	oplication is true and ace ther or not the Lease is information to contact re using an automatic di erings, and other mark orp., and its affiliates an application, and thereaf ther purpose of reviewing and assigns are authorize ot limited to credit bure	curate in all respects. I so approved. I expressly me using any means of laler device, calls using setting materials about and assigns to check my fiter in connection with the account, taking the account eaus, other companies,				
*APPLICANT#1		APPLICANT #2						

PrintName

Date

(if applicable)

Print Name

Date