



# THE CARLSON COMPANY

Your Source For Professional Service Equipment

P.O. Box 80897, Rancho Santa Margarita, CA 92688

Toll free phone: 800-222-6199 • Fax 949-768-3336

## EQUIPMENT LEASE APPLICATION

### BUSINESS INFORMATION

|  |                     |  |
|--|---------------------|--|
| Business Name  |                     | Federal Tax Identification Number<br><br><br>Proprietorship<br><br>Partnership<br><br>Corporation<br><br>LLC<br><br>____ Years In Business |
| Street Address/City/County/State/Zip   |                     |  |
| Equipment Location (If different from above.) Street Address/City/County/State/Zip |                     |  |
| Contact  | Business Phone No.  |  |
| Nature of Business   |                     |  |
| Principal/Partner/Officer Signing Lease  | Social Security No. |  |
| Home Street Address  |                     |  |
| City/State/Zip   | Residence Phone     |  |

### BANK REFERENCES

|                                       |                      |             |
|---------------------------------------|----------------------|-------------|
| Bank Reference Name                   | Account/Loan Officer | Phone No.   |
| Address/City/State                    |                      | Account No. |
| Bank Reference Name (2nd or Previous) | Account/Loan Officer | Phone No.   |
| Address/City/State                    |                      | Account No. |

### TRADE REFERENCES

|                            |              |
|----------------------------|--------------|
| LANDLORD (Name/City/State) | Contact Name |
|                            | Phone No.    |
| TRADE #1 (Name/City/State) | Contact Name |
|                            | Phone No.    |
| TRADE #2 (Name/City/State) | Contact Name |
|                            | Phone No.    |
| TRADE #3 (Name/City/State) | Contact Name |
|                            | Phone No.    |

### LEASE

|                   |                               |   |  |
|-------------------|-------------------------------|---|--|
| Lease Term (Mos.) | End of Lease Purchase Option: | \$1.00 Buyout Option<br>First & Last Payments in Advance<br>Plus Applicable Taxes | Estimated Equipment Cost<br>\$<br>Mo. Pmt (Tax Not Included)<br>\$ |
|-------------------|-------------------------------|---|--|

### EQUIPMENT

| Qty | Description | Price Each | Amount |
|-----|-------------|------------|--------|
|     |             |            |        |
|     |             |            |        |
|     |             |            |        |
|     |             |            |        |
|     |             |            |        |
|     |             |            |        |

### RELEASE

To Whom This May Concern:

This will be our authority and my request to you, to release any information requested concerning personal or business credit standing.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*\* PLEASE FAX COMPLETED APPLICATION TO 949-768-3336 \*\*\*