



COMPANY INFORMATION

Customer Name: Phone Number: Street Address: Fax Number: City/State/Zip: Contact: Type of Business: Year Started: Premises: Mortgage Lease Year Incorporated: Holder of Mortgage: Monthly Payment:

PRINCIPAL INFORMATION

Name: Title: Street Address: Phone Number: Social Security Number: Bank Account Number: Name: Title: Street Address: Phone Number: Social Security Number: Bank Account Number:

BANK REFERENCES

Bank Name: Phone Number: Street Address: Contact: Account Number: Date Opened: Bank Name: Phone Number: Street Address: Contact: Account Number: Date Opened:

TRADE REFERENCES

Name: Phone Number: Street Address: Contact: Account Number: Date Opened: Name: Phone Number: Street Address: Contact: Account Number: Date Opened:

LEASE DETAILS

Equipment: Cost: Term: Payment Amount: Factor: Advanced Payments:

ACKNOWLEDGEMENT

I hereby authorize Centric or any other investigative agency employed by Centric to investigate the references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility. This application does not obligate lessor to enter into the lease.

Authorized Signature Print Name Date