



LEASE APPLICATION

A PATRIOT COMMERCIAL LEASING PROGRAM

Phone: 800-991-9380
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 Fax: 609-419-4241

B U S I N E S S	BUSINESS NAME/LESSEE				TELEPHONE	
	ADDRESS (STREET)		(CITY)	(STATE)	(COUNTY)	(ZIP CODE)
	TYPE OF BUSINESS				AGE OF BUSINESS	FED. TAX NO.
	LOCATION OF EQUIPMENT (STREET)		(CITY)	(STATE)	(COUNTY)	(ZIP CODE)

O W N E R S H I P	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.	
	HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	DRIVER'S LIC. NO.
	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.	
	HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	DRIVER'S LIC. NO.
	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.	
	HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	DRIVER'S LIC. NO.

B A N K S	BANK	CONTACT		FAX	TELEPHONE
	ACCOUNT UNDER NAME OF	CHECKING ACCT. NO.	ORIGINAL BALANCE	CURRENT BALANCE	
	BANK	CONTACT		FAX	TELEPHONE
	ACCOUNT UNDER NAME OF	CHECKING ACCT. NO.	ORIGINAL BALANCE	CURRENT BALANCE	
B A N K S	BANK	CONTACT		FAX	TELEPHONE
	ACCOUNT UNDER NAME OF	CHECKING ACCT. NO.	ORIGINAL BALANCE	CURRENT BALANCE	
	BANK	CONTACT		FAX	TELEPHONE
	ACCOUNT UNDER NAME OF	CHECKING ACCT. NO.	ORIGINAL BALANCE	CURRENT BALANCE	

T R A D E S	COMPANY NAME	ACCOUNT NO.	TELEPHONE NO.	CONTACT PERSON

E Q U I P M E N T	VENDOR				CONTACT	
	ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	TELEPHONE
	EQUIPMENT TO BE LEASED				<input type="checkbox"/> New <input type="checkbox"/> Used	
	COST OF EQUIPMENT \$	TERMS OF LEASE	RATE / MO. PAYMENT	DEPOSIT RECEIVED \$		

I hereby authorize [Lessor Name] or any credit bureau or other investigative agency employed by [Lessor Name] 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.

X _____
 SIGNATURE/TITLE

_____ DATE