

LeaseWise, LLC

Mark Weiss
1360 Bedford Street
Stamford, CT 06905

Telephone: 203-977-0485
Fax: 203-316-0854

Application for Financing

NAME

Legal Name, as registered: _____
Address: _____ City: _____ State: _____ Zip: _____
Contact: _____ Title: _____ Phone: _____ Fax: _____
Email Address: _____ State in which incorporated: _____

Business Structure

Legal Form: _____ Proprietorship _____ Partnership _____ Sub S _____ Corporation _____ LLC
Date Business Started: _____ Date Present Ownership: _____
Type of Business: _____ Number of Employees: Full: _____ Part: _____
Any Work done Outside US: _____ Federal ID #: _____

Principal Owners/Officers

Name: _____ DOB: _____ SS# _____ U.S. Citizen _____ Perm. Res _____
Address: _____ City: _____ State: _____ Zip _____ Home Phone _____
Name: _____ DOB: _____ SS# _____ U.S. Citizen _____ Perm. Res _____
Address: _____ City: _____ State: _____ Zip _____ Home Phone _____

Credit References: Include Finance Companies, Leasing Companies, Banks

Bank: _____ City _____ State _____ Account # _____ Phone _____
Bank _____ City _____ State _____ Account # _____ Phone _____
Name _____ City _____ State _____ Account # _____ Phone _____

Initial Financing Request

Type of Equipment to be Financed: _____ New: Y N Vendor _____
Approximate Amount: _____ Term months) _____ Option: _____
Equipment Location: _____

Signature

The undersigned hereby certifies that the information contained herein is true and correct. You are authorized to make all inquiries necessary in order to determine the credit worthiness of Applicant.

Signature: _____ Title: _____ Date: _____