

CREDIT APPLICATION						
Lessee Legal Company Name				Date Established		
Company Address		City		State		Zip
email			Phone		Fax	
Federal Tax ID or Social Security Number				State of Incorporation		
Busines Structure Non Profit Partnership LLC Corporation Sole Proprietorship						
Guarantors / Owners						
Name (Owner #1)		Title		Social Security #		% of Ownership
Home Address		City		State		Zip
Phone	email			Signature (I agree to the authorization to obtain consumer report below)		
Name (Owner #2)		Title		Social Security #		% of Ownership
Home Address		City		State		Zip
Phone	email			Signature (I agree to the authorization to obtain consumer report below)		
Name (Owner #3)		Title		Social Security #		% of Ownership
Home Address		City		State		Zip
Phone	email			Signature (I agree to the authorization to obtain consumer report below)		
Credit and Trade References						
Major Trade Acct. 1		City / State		Contact Name	Phone	email
Major Trade Acct. 2		City / State		Contact Name	Phone	email
Bank 1	Acct Type	Acct #	Contact Name	Phone	email	Date Opened
Bank 2	Acct Type	Acct #	Contact Name	Phone	email	Date Opened
Vendor Info and Transaction Details						
Vendor Name		Address			City	State
Contact Name		Phone		email		Resale #
Equipment Description				Equipment Location (if different from above)		
Term Requested:				Total Invoice w/o tax:		

Authorization to Obtain Consumer Credit Report By signing this application, each individual(s), who is a principal of the credit applicant listed below or a personal guarantor of its obligations, provides written instructions to Fort Capital or its designee (and any assignee or potential assignee thereof) authorizing review of his or her personal credit profile, as well as the corporate profile, from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the applicant and subsequently for the purposes of update, renewal or extension of such credit and for reviewing or collecting the resulting account. Furthermore, I acknowledge that this application is for the extension of commercial credit only and any equipment leased will be used exclusively for commercial purposes. A photo static or facsimile copy of this authorization shall be valid as the original.

Authorized Signature: _____

Date: _____

Name: _____

Title: _____