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	<h2 style="margin:0;">Lease Application</h2>	Phone: 610-962-9292 Fax: 610-962-9666
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Business Information				
BUSINESS NAME/LESSEE		TRADE NAME (DBA)		CONTACT
PHYSICAL ADDRESS (STREET)		CITY	STATE	COUNTY ZIP CODE
TYPE OF BUSINESS		TELEPHONE	EXT	FAX NUMBER
WEBSITE		EMAIL ADDRESS	TAX EXEMPT #	STATE OF TAX EXEMPT #
LOCATION OF EQUIPMENT (STREET)		CITY	STATE	COUNTY ZIP CODE
OWNERSHIP: <input type="radio"/> Proprietorship <input type="radio"/> Partnership <input type="radio"/> C Corp <input type="radio"/> Sub 'S' Corp <input type="radio"/> LLC				FED. TAX NO.
NUMBER OF EMPLOYEES	STATE OF INCORPORATION		DATE BUSINESS STARTED	

Ownership Information					
PRINCIPAL'S NAME	TITLE	% OWNERSHIP	SOCIAL SECURITY NUMBER		
HOME ADDRESS (STREET)	CITY	STATE	ZIP CODE	<input type="radio"/> OWN HOME PHONE NO.	EMAIL ADDRESS
				<input type="radio"/> RENT	
PRINCIPAL'S NAME	TITLE	% OWNERSHIP	SOCIAL SECURITY NUMBER		
HOME ADDRESS (STREET)	CITY	STATE	ZIP CODE	<input type="radio"/> OWN HOME PHONE NO.	EMAIL ADDRESS
				<input type="radio"/> RENT	
PRINCIPAL'S NAME	TITLE	% OWNERSHIP	SOCIAL SECURITY NUMBER		
HOME ADDRESS (STREET)	CITY	STATE	ZIP CODE	<input type="radio"/> OWN HOME PHONE NO.	EMAIL ADDRESS
				<input type="radio"/> RENT	

Banking Information			
BANK	CONTACT	TELEPHONE	FAX
ACCOUNT UNDER NAME OF	CHECKING ACCOUNT NUMBER	SAVINGS ACCOUNT NUMBER	BORROWING <input type="radio"/> YES <input type="radio"/> NO

Miscellaneous Information			
INSURANCE AGENT	ADDRESS	TELEPHONE	EMAIL ADDRESS

Lease Information			
VENDOR	VENDOR CONTACT	TELEPHONE	EMAIL ADDRESS
EQUIPMENT TO BE LEASED	COST OF EQUIPMENT	<input type="radio"/> New <input type="radio"/> Used	EXPECTED DELIVERY DATE
LEASE TERM (IN MONTHS) <input type="radio"/> 12 <input type="radio"/> 24 <input type="radio"/> 36 <input type="radio"/> 48 <input type="radio"/> 60	PURCHASE OPTION <input type="radio"/> \$1.00 <input type="radio"/> 10% Buyout <input type="radio"/> FMV	OTHER:	

I hereby authorize Fleetway Capital Corp. or any credit bureau or other investigative agency employed by Fleetway Capital Corp. 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
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