

BUSINESS INFORMATION

EXACT LEGAL NAME OF BUSIN	IESS ENTITY (LESSEE)			TELEPHONE NUMBER		FAX NUMBER		
BUSINESS ADDRESS (STREET)		CITY		COUNTY		STATE	ZIP CODE	
EQUIPMENT LOCATION, IF DIFFERENT THAN ABOVE		CITY		COUNTY		STATE	ZIP CODE	
NATURE OF BUSINESS		SIC CODE	FEDERAL T	AX ID NO	COMPANY WEB	IPANY WEB SITE		
YEARS IN BUSINESS	YRS PRESENT CONTROL	ANNUAL SALES		PRIMARY	CONTACT	EMAIL ADD	DRESS	

CAPITALIZATION INFORMATION

BUSINESS STRUCTURE					
STOCKHOLDER NAME		OW	NERSHIP %	PHONE	WEB ADDRESS
CONTACT NAME		TITI	.E	PHONE	EMAIL ADDRESS
STOCKHOLDER NAME		OW	NERSHIP %	PHONE	WEB ADDRESS
CONTACT NAME		TITI	.E	PHONE	EMAIL ADDRESS
STOCKHOLDER NAME		OW	NERSHIP %	PHONE	WEB ADDRESS
CONTACT NAME		TITI	E	PHONE	EMAIL ADDRESS

EQUIPMENT AND SUPPLIER/VENDOR INFORMATION					
VENDOR		CONTACT PERSON	TELEPHONE NUMBER		
EQUIPMENT DESCRIPTION					
COST OF EQUIPMENT \$	REQUESTED FINANCE TERMS	EXPECTED DELIVERY D	ATE		

TO PROCESS THIS APPLICATION UNDER THE EXPRESS PROGRAM, PLEASE INCLUDE THE FOLLOWING

1.	First Page of the Last 3 Mont	ly Business Bank Statements.
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2.	Vendor Invoice	e or Proposa	with Equipme	nt Description ((Year, Make,	Model, Type	э).

3. Supporting Equipment Spec Sheets, Pictures, Brochures, Web Site (If Available).

4. Legible Copy of Principal(s) Drivers License.

NOTE: Depending On The Amount Of This Application, There May Be An Additional Request For Financial Information.

PLEASE FILL OUT THIS APPLICATION COMPLETELY AND EXECUTE BELOW

✓ DATE:	A Facsimile Or Electronic Copy Of This Agreement With Signature Shall Be Considered To Be An Original
and are made for the purpose of obtaining credit. I authorize TEQlease, and/or its assigns (whatever source it deems appropriate, which authorization shall extend to obtaining and rev subsequently for the purpose of update, renewal or extension of such credit or additional cre above references to release credit information to TEQlease and/or its assigns. I agree to notif by you to be a continuing statement of the conditions of the Applicant until written notice to property of TEQlease whether or not credit is granted, and that this constitutes an application representative for the subject company, by my signature below I authorize fax and E-mail between our two companies. I additionally affirm my identity as identified on this Application. Fi identifies each person who requests an account. What this means for you; when you apply for to identify you including a copy of your valid driver's license or other identifying documents. If this Application for business credit is denied, you have the right to a written statement of the from the date you are notified of our decision. We will send you a written statement of the reas: SIGNATURE: DATE:	iew of credit profiles from national credit bureaus in considering this Application and dit and for reviewing or collecting the resulting account. I further authorize any of the y you of any material change in our affairs, and this statement shall also be construed the contrary is received by you. It is understood that this Application shall remain the only and shall not be binding upon either TEQlease or the applicant. Additionally, as a transmissions/communications of all kinds including sales and product information, ederal law requires all financial institutions to obtain, verify and record information that an account, we will ask for your name, address and other information that will allow us specific reasons for denial. To obtain the statement, contact TEQlease within 60 days