

LESSEE

Legal Business Name				Contact
Street Address		City	State	Zip Code
Equipment Location		City	State	Zip Code
Business Type		Federal Tax I.D.		
Ownership Information	Proprietorship _____	Corporation _____	Partnership _____	
Years under Current Ownership		Company Established Date		
Insurance Company Name		Contact	Phone	

OWNERSHIP

Principle's Name		Title	S/S/N
Home Address		% of Ownership	Home Phone
Principle's Name		Title	S/S/N
Home Address		% of Ownership	Home Phone

BANKS

Bank Name 1	Contact	Phone
Account Number	Name on the Account	
Bank Name 2	Contact	Phone
Account Number	Name on the Account	

BUSINESS LOAN / LEASE

Name	A/C #	Phone
Name	A/C #	Phone

TRADE REFERENCE

Company Name	Contact	Phone
Company Name	Contact	Phone
Company Name	Contact	Phone

EQUIPMENT INFORMATION

Type of Equipment	New _____	Used _____			
Vendor	Contact	Phone			
Equipment Cost	Term	Purchase Option	\$1.00 _____	10% _____	FMV _____

AUTHORIZATION

I authorize **Prima Financial** to make inquiries as necessary to verify the accuracy of the statements made and determine my creditworthiness. I certify the above and statements contained in the attachments are true and accurate as of the stated date(s).

Customer's Signature	Title	Date
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