



# BUSINESS LEASE APPLICATION

(Incomplete information may cause delays. Please complete in full.)

## BUSINESS PROFILE

LEGAL NAME OF BUSINESS				TAX ID #	
STREET ADDRESS		CITY	COUNTY	STATE	ZIP CODE
MAIL ADDRESS		CITY	COUNTY	STATE	ZIP CODE
PHONE NUMBER	FAX NUMBER	CELL PHONE NUMBER	E-MAIL ADDRESS		
BUSINESS STRUCTURE Proprietorship    Partnership    Corporation    LLC    Other			DATE ESTABLISHED	GROSS ANNUAL SALES	
HOW LONG UNDER PRESENT MGMT	NUMBER OF EMPLOYEES	Has the business ever been in receivership or declared bankruptcy during the last 7 years? Yes                      No			
DESCRIPTION OF BUSINESS					

## BUSINESS OWNER INFORMATION – ALL OWNERS OF 25% OR MORE OF COMPANY – Attach additional sheet if more than two

NAME	SOCIAL SECURITY NUMBER	OWNERSHIP %	DATE OF BIRTH	HOME PHONE NUMBER
STREET ADDRESS	CITY	COUNTY	STATE	ZIP CODE
TITLE	YEARS WITH COMPANY	NET WORTH EXCLUDING VALUE OF COMPANY	ANNUAL INCOME	
NAME	SOCIAL SECURITY NUMBER	OWNERSHIP %	DATE OF BIRTH	HOME PHONE NUMBER
STREET ADDRESS	CITY	COUNTY	STATE	ZIP CODE
TITLE	YEARS WITH COMPANY	NET WORTH EXCLUDING VALUE OF COMPANY	ANNUAL INCOME	

## BANK REFERENCES

BANK NAME	BRANCH	ACCOUNT NUMBER	CONTACT PERSON	12 MONTH AVG BALANCE

## BUSINESS CREDIT / TRADE REFERENCE

NAME & ADDRESS OF CREDITOR	PHONE NUMBER	ACCOUNT NUMBER	HIGHEST BALANCE	CURRENT BALANCE	MONTHLY PAYMENT

## LEASE REQUEST

AMOUNT \$	# OF MONTHS	RATE FACTOR	PURCHASE OPTION ___ \$1.00 Buyout    ___ % Residual    ___ Fair Market Value	ESTIMATED PAYMENT \$
EQUIPMENT TO BE LEASED (MAKE, MODEL, SERIAL #)				
STREET ADDRESS EQUIPMENT TO BE LOCATED			COUNTY	___ Inside City Limits    ___ Outside City Limits

## VENDOR INFORMATION

NAME	CONTACT PERSON	PHONE NUMBER	FAX NUMBER
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The undersigned individual who is either a principal, personal guarantor or a sole proprietor of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents and authorizes us or our designee the use of a consumer credit report on the undersigned, from time to time as may be needed, as well as the release of any and all information requested for the purpose of granting business credit. A Photocopy of this release will act as an original. Date of birth is now required by the Patriot Act.

Signature \_\_\_\_\_  
 Title \_\_\_\_\_ Date \_\_\_\_\_

**Bankers Direct Business Finance**  
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