



110-395-000

Equipment Lease Application

3 Broadway Suite 305 – Beverly, MA 01915 - Phone: (866) 952-0006

Company Information

Company Name: _____

Contact Name & Title: _____

Address: _____

City, State Zip: _____

Federal Tax ID: _____

Business Phone: _____

Cell Phone: _____

Fax: _____

Email: _____

Date Business Started: _____

Business Type: Corporation LLC Non Profit
Partnership Sole Proprietorship

Bank Reference

Bank Name: _____

Account #: _____

Contact: _____

Phone: _____

Ownership Information

Principal I Name: _____

Title: _____

Ownership %: _____

Address: _____

Social Security # _____

Principal II Name: _____

Title: _____

Ownership %: _____

Address: _____

Social Security #: _____

Equipment Information

Equipment Type: _____

Equipment Cost: _____

New or Used: _____ Year? _____

Vendor Name: _____

Time Frame for Purchase: _____

Signature: X _____

Signature: X _____

Please Fax Completed Application to 888-351-6606

By signing this form, each undersigned individuals(s), who either a principle of the credit applicant listed below, or a personal guarantor of its obligations, provides written instruction to Cove Financial Services, LLC or Lease One or its designee (and any assignee or potential assignee thereof) authorizing review of his or her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the application of the credit applicant and subsequently for the purposes of update renewal, or extension of such credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be as a valid original. In addition to authorizing review of my/our credit profile from any national credit bureau the undersigned also authorizes my/our financial institutions and creditors to release credit information required by Cove Financial Services, LLC or Lease One or its designee,

(and any assignee or potential assignee thereof.)