



LESSEE INFO

Company: _____ Tax ID#: _____
Address: _____ Phone: _____ Mobile: _____
City: _____ State: _____ Zip: _____ Fax: _____ Years in Business: _____
Email: _____ Type of Business: _____ Corp [] LLC [] Proprietorship [] Partnership []
1. Officer Name: _____ Title: _____ SS#: _____
Address: _____ Home Phone: _____ Date of Birth (M/D/Y): _____
City: _____ State: _____ Zip: _____ Percentage of Ownership: _____
2. Officer Name (or spouse): _____ Title: _____ SS#: _____
Address: _____ Home Phone: _____ Date of Birth (M/D/Y): _____
City: _____ State: _____ Zip: _____ Percentage of Ownership: _____

EQUIPMENT TO BE LEASED

Description: _____ Cost (excluding tax): _____ \$

EQUIPMENT SUPPLIER

Name: _____ Contact Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip Code: _____

BANK REFERENCES (Bank accounts should be at least two years old. If less, please supply previous bank references.)

Bank: _____ Account Type: _____ Date Opened: _____
Contact: _____ Phone: _____ Account #: _____
Bank: _____ Account Type: _____ Date Opened: _____
Contact: _____ Phone: _____ Account #: _____

TRADE REFERENCES

Name _____ Account #: _____ Phone: _____
Name _____ Account #: _____ Phone: _____

LEASES/LOANS

Leasing Co/Bank Name _____ Account #: _____ Phone: _____
Original Balance: _____ Current Bal.: _____ Monthly Payment: _____ Date Opened: _____
Leasing Co/Bank Name _____ Account #: _____ Phone: _____
Original Balance: _____ Current Bal.: _____ Monthly Payment: _____ Date Opened: _____

INSURANCE

Insurance Carrier: _____ Contact: _____ Phone: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS ->

Have you ever had a repossession? Yes [] No []
Have you ever filed bankruptcy? Yes [] No []
Have you ever had any judgments against you? Yes [] No []
Are there any suits or legal actions pending against you? Yes [] No []
Are your taxes paid current? Yes [] No []

AUTHORIZATION:

I hereby authorize banks, trade references and creditors to release credit information to Park Western Leasing, Inc. (PWLI) and/or it's assigns. I further authorize PWLI and/or it's assigns to obtain credit information including D&B reports and credit bureau reports. I understand that PWLI relies on information provided herein in advancing credit to me and/or the company I represent. I also understand that PWLI may search public records to aid in its consideration of my application, or as verification of information provided on the application. The information provided on this application is true, complete and correct.

X _____ Date: _____

FOR PWLI USE ONLY:
Account Rep: _____
Bank _____ Trade _____ CBR _____

Assets	Amount (\$)	Liabilities	Monthly Payment	Amount (\$)
Cash in hand:		Credit Cards:		
Cash in Bank: <i>(including money market accts, CDs)</i>				
Marketable Securities:		Notes Payable to Banks:		
Accounts and Notes Receivable:		Notes Payable to Others:		
Real Estate – Residential:		Mortgage Debt:		
Real Estate – Land / Investments:				
Cash Value of Life Insurance:		Taxes Payable:		
IRA, Keogh, Profit Sharing:		Life Insurance Loans:		
Personal Property, Vehicles and other assets (please list):		Contingent Liabilities:		
		Other Liabilities (list):		
		Total Liabilities		
		Net Worth		
Total Assets ►		Total Liabilities + Net Worth ►		

APPLICANT SIGNATURE(S)

I/we hereby affirm that the information contained in this financial statement is presented for the purpose of obtaining credit as of the date indicated and is true, complete and correct. I/we understand Park Western Leasing, Inc. (PWLI) is relying on this statement of my/our financial condition in advancing credit to me/us. PWLI is authorized to conduct an investigation of my/our credit or employment status either directly or through any agency employed by PWLI for that purpose. PWLI may disclose to any other interested parties PWLI's experience with my/our account. I/we agree to inform PWLI immediately of any matter which will cause any significant change in my/our financial condition. I/we understand that PWLI will retain this financial statement whether or not credit is granted.

Any significant changes expected to this financial statement in the next 12 months? Yes No *(If yes, attach information)*

Date Applicant

Date Co-Applicant